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ABSTRACT

The purpose of this study is to examine the training needs of caregivers of toddlers. Questions addressed include: (1) Is specialized training necessary? (2) Are caregivers receiving adequate training for providing appropriate environments for children of 1 or 2 years of age? (3) What are the obstacles and encouragements for caregivers of toddlers who wish to pursue further training? A review of the play behaviors of toddlers indicates that toddlers' play is both qualitatively and quantitatively different from that of younger or older children. Caregivers need specialized training if they are to provide toddlers with developmentally appropriate physical, social, and emotional environments. A teacher interview was designed to determine teachers' views of their training regarding the care of toddlers, and a director interview was designed to determine directors' assessments of the skills, abilities, and training needs of teachers of toddlers. A 28-item program assessment instrument, the Toddler Program Profile, was developed to serve as a measure of the physical environment, the daily schedule, adult-child interactions, and adult-adult interactions. Staff of six centers participated in the study. Findings identify areas in which caregivers of toddlers need additional training. Interview schedules and the assessment instrument are appended. (RH)

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AN EXAMINATION OF TRAINING ISSUES FOR CAREGIVERS OF TODDLERS

Brenlee Robinson

August, 1990

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Department of Human Development and Child Studies

School of Human and Educational Services

OAKLAND UNIVERSITY

Rochester, Michigan

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AN EXAMINATION OF TRAINING ISSUES FOR CAREGIVERS OF TODDLERS

Presented to the Faculty of

Department of Human Development and Child Studies

School of Human and Educational Services

OAKLAND UNIVERSITY

Rochester, Michigan

In Partial Fulfillment

of the Requirements for the Degree

Masters of Arts in Teaching in

Early Childhood Education

by

Brenlee Robinson

August, 1990

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Andrew Gunsberg, Ph.D., Advisor

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RATIONALE

In this country in 1986, more than 50% of all women with children under age three were in the labor force. Day care for infants and toddlers has become a recognizable national concern. Approximately 70% of all infants and toddlers in out-of-home care by non-relatives are in family day care. The great majority of these homes are unmonitered and unlicensed.

Another day care option for families is center based care. Child care centers that are in operation expressly for the purpose of caring for young children often offer advantages over home care situations, such as, for example, year-round care, longer hours, trained and/or experienced staff, and licensed care, to name a few. There exist both for-profit and non-profit day care centers. Non-profit centers are often run by churches, community centers, schools, or an employer. For-profit centers may be independently owned, or a branch of a regional or national chain.

Universities and community colleges now offer courses, degrees and diplomas in early childhood education. The phrase "early childhood" has typically referred to children of ages three and four. As more and more families need and make use of day care services, it is no longer just preschoolers who are spending their days in center based care. Infants and toddlers are an increasingly growing segment of not only the day care population, but also the center based day care population. When day care directors seek out caregivers from the pool of "early childhood education" trained people, are they in fact finding people

trained to care for all children under age five, or are they finding that early childhood education credentials means training for working with children who are three and four years old? Or, is this the case, and directors do not even realize it? Are the increasing numbers of infants and toddlers in group care receiving adequate and sufficient appropriate care? Are their needs being met? Are their needs even being recognized?

Providing quality care for infants and toddlers does not mean providing a "scaled down" version of expectations for preschoolers. Quality care for very young children requires a thorough understanding of the developmental issues and needs of the very young child, which are also unique to children of that age. In order to accommodate and build on the developmental issues relevant to the one and two year old child, and to be able to provide quality care for children of this age, caregivers of toddlers must have sufficient training dealing specifically with children in this stage of development.

According to the Michigan State Department of Social Services, day care licensing regulations for children age 2 weeks to 2 1/2 years, require one "qualified" caregiver for every four children; for children 2 1/2 -3 years, one qualified caregiver for every ten children. In all cases, a "qualified caregiver" is someone who "is 17 years of age and who has satisfactorily completed at least 1 year of a vocational-occupational child care aide training program approved by the department of education." This training may also be on site training provided by the day care center.

There is no reference to the caregiver having training with the specific age group she will be working with. According to the state, the same training in child care is sufficient for working with any children from age 2 weeks to five years. There is no differentiation in requirements for caregivers of five year olds, caregivers of two year olds, or caregivers of infants.

For those caregivers who have had or desire early childhood training, there was and is relatively little available to anyone that specifically focuses on the unique needs of infants and toddlers. Again, as "early childhood" has meant "preschool children", courses and practicums related to infant and toddler care are most often offered as an optional choice, if they are offered at all. Thus, even of those caregivers who have had training, many have limited, if any training related to infant and toddler care and development. Thus, very many trained early childhood educators are aware of the needs of children above age three, only. Of those who have had training with infants and/or toddlers, how much have they really had?

The purpose of this paper is to examine the training needs of caregivers of toddlers. The questions being addressed include:

1) Is specialized training necessary?

2) Are caregivers receiving adequate training in order to provide appropriate environments for children of ages one and two years?

3) What are the obstacles and encouragements for caregivers currently working with toddlers to pursue further training?

APPROPRIATE ENVIRONMENTS FOR GROUP CARE OF CHILDREN AGE 12 TO 30 MONTHS

When choosing an out-of-home caregiver, parents of children of any age have to resort to relying on their own intuition to determine what they think will be the best environment for their child. When parents of children under three seek an out-of-home caregiving situation, they are at an additional disadvantage in that both they and the caregiver may well be unable to describe or recognize what is a developmentally appropriate environment. Both parties may have to resort to reference to what is an appropriate preschool environment for comparison.

The sum of all the caregiver-child interactions is the social-emotional environment. It is how the caregiver relates to the child verbally and physically; it is how the caregiver conveys how she expects the child to behave, and it is how the caregiver responds when the child doesn't. Unless a caregiver is well versed in the developmental issues and milestones of the children she is caring for, she is destined to expect behaviors that are developmentally inappropriate, and thus provide a discordant social-emotional climate. In the day care setting, the social and the physical environments are the two most salient influences on children's development. (Wachs 1987).

The arrangement of space also affects very much of what children do. (Wachs 1987). It affects their peer social interactions, their interactions with adults, and most of all, it affects their exploration and play with materials. When the physical environment in a child care

setting accommodates and enhances the play and the capabilities of it's occupants, then it is a "developmentally appropriate" environment. Beyond the obvious replacement of a toilet area with a diaper changing area, do children under age three have differing needs in terms of the physical environment from older children? This paper will first discuss what are the elements in the environment that very young children need, and then look at whether caregivers of toddlers are providing an appropriate environment.

When children are allowed to choose their own activity, they play. At any age, the activities that children engage in when given the free choice reflect their level of functioning. Thus, at any age, children's play is characteristic of their stage of development. In very young children, (under age three) cognitive, social, emotional, and physical development are highly interrelated, and much more so than at later stages. Therefore, a caregiver who promotes a higher level of play, whether it be social play, symbolic play, object play or motor play can thereby promote a higher level of functioning.

By examining their play, this section will make clear the unique environmental needs of one and two year old children. It is by focusing on these children, that we can determine what is developmentally appropriate. Play behaviors that are characteristic only of toddlers, justify the argument for specialized training for caregivers of toddlers.

THE NATURE OF TODDLER PLAY

The first step in defining toddler play is the attempt to define play. This first step has been a thorn to many theorists, who agree that play is easy to recognize, but difficult to define. Play is that which is the freely chosen activity of the child. Children engage in play for their own enjoyment, to meet their own needs and wishes, and to generate stimulation. Play is free from externally imposed rules, although internally imposed rules may be present. While these are descriptions of play, they do not provide definition.

Play is not an attempt to acquire new information. Seeking new information is exploration, which is a complement to, but separate from play. Play is not for learning of new skills, but is important for practicing and consolidating previously learned skills which might very quickly be lost otherwise. These newly acquired skills which need to be consolidated might be for example, maneuvering their own bodies, interacting with objects, or interacting with people. This way, play both contributes to, and is reflective of the level of cognitive development. Piaget defined play as an imbalanced state in which assimilation is dominant over accommodation.

EXPLORATION

Exploration is both "opposite" to, and similar to play. According to Piaget's definition, exploration is the predominance of accommodation over assimilation, the opposite of the definition of play. When the child attempts to answer "What can this object do?" he is engaged in exploration, and will attempt to find out what he can about the object. This exploratory behavior is dominated by the object

itself, or sometimes by a person being explored as though an object. Play is an "organism dominated" behavior.

Play and exploration are similar in that they are both intrinsically motivated behaviors, not concerned with meeting any externally imposed goals. Exploration occurs before play, and is serious in nature compared to the usually joyous nature of play. Exploration of an unfamiliar object paves the way for play, which can occur with a now familiar object. Toddlers will "explore" a novel peer much as they would a novel toy. Research has indicated that toddler interest is highest when presented with a novel peer, less so with novel or familiar toys, and they are the least interested with familiar peers. Jacobson (1981).

DEVELOPMENT OF OBJECT PLAY

In infancy, the very young baby starts out with reflexes and sensory capacities, but without knowing how to play. Play actions develop as the infant becomes more adept at controlling his own actions, repeating these actions, and adapting them to other circumstances. This first to emerge type of play is object play.

At first, objects direct the infants attention, and provide an opportunity for the infant to act on the object, using the schemas he knows or discovers. He consolidates this knowledge by practicing the action, and repeating it. The infant then generalizes and adapts these actions, or schemas, to other objects, and practices these schema on the new object or objects.

This assimilating of actions to novel objects is as Piaget's definition of play, the dominance of assimilation over accommodation. These actions are not goal directed, and are pleasurable to the infant. In addition, by expanding his actions to novel objects, the infant is expanding his awareness of the world, now to include these new objects. The activity is play, but it is also the infant's method of exploration.

The child at play will ignore the original purpose of an object and instead use it any way he pleases. When the child attempts to answer "What can I do with this object?" he is engaged in play. Children at various stages of development play with objects differently, as is appropriate to their level of functioning. Objects are an integral part of play for children at any age, but are a critical component of play for infants and toddlers. The sensory motor child learns about his world through his exploration of objects.

During the first year as the infant gains control and coordination, his object play becomes less repetitious and undifferentiated and more organized and sequenced. Play actions develop as a result of this practicing and combining of experiences. During the second year, the child becomes able to construct new schemas from combinations of already existing ones. These characteristics of toddler play as well as others that will be discussed in upcoming sections, all of which are unique to toddlers, substantiate the need for specialized training for caregivers of toddlers.

SENSORY MOTOR PLAY IS OBJECT PLAY

Piaget called the first two years of life the sensory motor stage. This is when children acquire knowledge about their surroundings through sensory exploration. They watch, listen to, pat, touch, grasp, throw, rub, and mouth everything that comes within their grasp to understand the properties of objects in the only way they know how, through their senses. The child develops object permanence in the first year, discovering that neither objects, nor people cease to exist when they are out of sight.

The toddler can now begin to experiment with objects, with many "trial and error" behaviors. Objects are of primary importance to children in the sensory motor stage. It is through extensive exploration of objects that infants and toddlers come to know about their world. They are exploring and testing objects, to learn about their physical world, and they are playing with objects to consolidate knowledge they already have.

One "object" toddlers are discovering and thus exploring, are their own bodies. Here play and exploration intertwine, as the toddler is asking both "what can this object do?" and "what can I do with this object?". "What can this object do" will be discussed more in terms of motor development. "What can I do with this object" is often explored in terms of, or in relation to other objects. For example, exploring how far she can throw an object, or how loudly she can make these objects bang together, is both testing and exploration of the self as well as of the object. The presence of the object is vital.

For these reasons an environment designed for toddlers must provide a wide variety of objects to explore, manipulate, and play with. The objects should be of a variety of shapes, textures, weights, sizes, colors, densities and even tastes. This includes real objects as well as manufactured toys. "Safe" kitchen utensils such as pots and pans and plastic containers, oversized or adult clothing, paper and crayons, are all inexpensive and easily available objects suitable for toddler play. Pourable substances, wet and dry, such as water, sand, cornmeal, flour, mud, cornstarch, and rice are often forgotten play materials. Pouring, filling, and dumping are tasks the toddler spends a great deal of time at. These activities are accommodated by, but not limited to, the substances provided in sensory play. Gathering, filling and dumping occur throughout the classroom. The caregiver should expect thorough sensori-motor exploration from toddlers, and prepare a space that will contain the substances yet allow exploration, such as a water table, a wading pool, an infant tub, or a sink. Providing for these types of exploratory behaviors directly addresses the toddlers' need to learn about his world through the senses. All substances should be non-toxic, as exploration still occurs through the mouth.

Continued and easy access to this variety of toys is also an important consideration. Collard (1971) in a study comparing exploratory play in children from low and middle income families found that the greater opportunity to explore and play with a wide variety of objects seemed to increase the quality as well as the quantity of exploratory play. An optimal environment for toddlers allows for access to materials for a great part of, if not all of the day. Toys

should be stored on low, open shelving, so they are visible and accessible to toddlers.

DEVELOPMENT OF SYMBOLIC PLAY

Research by Rosenblatt (1977) described how a child's use of objects changes between the first and second year. In the first year, typical infant play is with one object at a time in an unpredictable manner. In the second year, use of single objects decreases in frequency, and is replaced by use of many objects at once. For example, the one year old may be content banging, or sucking, one toy spoon. The two year old will more likely play with the toy spoon with a cup and plate, with additional spoons, or with other additional objects. As well, toddler play becomes less unpredictable and more appropriate or stereotypic.

Toddlers are increasingly able to pay attention to the physical characteristics of objects, and consequently more able to recognize and demonstrate awareness of common uses of these objects. For example, a study by Fenson, Kagan, Kearsley, and Zelazo,(1976) compared the object play of 7, 9, and 13 month old children, using a toy tea set for two. At seven months, the predominant type of play was motor play, mouthing or banging single items at a time, combined with close visual and tactile examination of the objects. By thirteen months the predominant type of play was what is termed "relational play". Relational play is the predecessor to symbolic play. This is the combining or relating of two objects in an appropriate association. Putting a lid on a pot, or a cup on a saucer, or two spoons together is relational play. This type of play indicated more interest in physical and functional

relations of toys and objects at 13 months than had been evident at seven months, although the trend was discernible at nine months. The emerging ability to relate two objects indicates an important advance in cognitive functioning.

These findings seem to indicate that object play in infancy becomes decentered and more integrated, and that relational play, or combinational play, increases. These findings also seem to indicate that in the second year, object play is progressing from the end of the continuum that is motor or functional play, toward the end that is conventional play, which is goal oriented organized play.

The above findings and indications seem to have a number of implications toward the physical environment for two year old children. One is the need for sufficient materials for the toddler to explore and manipulate. It is after the toddler has tactily explored materials, and acquired familiarity and thereby mastery with single objects, that he is able to expand his cognitive functioning to relational play. This presents additional arguments for the need for sufficient and diverse toys.

As in relational play the toddler begins to combine objects by function, toys must be made available in such a way as to enhance and accommodate this advance in cognitive functioning. A classroom divided into distinct work areas groups together toys that would be used together.

For example, the High/Scope curriculum prescribes a room arrangement for preschoolers with such distinct areas, to allow

children to make purposeful choices about what to do, rather than randomly choosing whatever attracts the eye. Grouping objects together that can be used together accommodates object play, and facilitates and enhances the onset of relational play, both characteristic of one and two year old children.

TODDLER SYMBOLIC PLAY

In the second year, there is a transition from the mastery play of the infant to the symbolic play of the preschooler. At first, the sensori-motor child will imitate a model's actions in the model's presence. Later, the child is able to defer the imitation of simple actions until the model is absent. Around 18 months of age, the child becomes able to defer imitation of complex acts. This deferred imitation indicates the child's progress from representation in action to representation in thought. This achievement signals the transition out of the sensori-motor stage and into the preoperational stage. Imitation in the absence of a model is the beginning of pretense or "make-believe" play. Thus the beginnings of symbolic play and deferred imitation are almost simultaneous events. Toddlerhood is a time of transitions.

Piaget identified three types of symbolic play, two of which are typical of one and two year old children. The first type is the application of one symbolic scheme to a new set of objects. The child imitates her own actions, and draws from her own experience. For example, the child who pretends to do something she herself has done, such as drink from a cup, put on a hat, or go to sleep, is displaying emerging symbolic play.

The second type involves one substitution of one object for another, of one person for another, or of one person or object for one object or person. The behaviors are imitated from other models, whom the child has seen previously. For example the child may pretend to perform a specific act like grandma, such as spoon out dinner, or the child may make a doll imitate grandma.

The third type of symbolic play is more typical of preschool children. It involves planned combinations of symbolic schemes, as well as a sequence or pattern of behavior. An example of this would be for the child to put a doll or another child in a stroller, announce that they are going shopping for ice cream, proceed to the make-believe store, and choose a flavor. In the preschool years this third type of symbolic play is increasingly enacted in a social context, with a group of children participating, with increasing coherence and orderly replication of reality. Piaget calls this "collective symbolism". The knowledgeable teacher does not expect toddlers to be able to pretend like preschoolers.

More recently, researchers Watson and Jackowitz (1984) examined the development of presymbolic action schemes, particularly in the second year. They also found a predictable sequence of symbolic play, which they analyzed in terms of agent and object substitutions. As young as 12 months, infants were observed in the first type of pretend play, using themselves as the agent, for example pretending during the day to go to sleep as they do at night. This simple make-believe is completely self directed, and thus not genuine symbolic play according to Piaget. Outer directed pretense is when an agent other than the

child, such as an object or person, are made to perform pretend actions on different recipient objects. An example would be pretending that toy cows are eating pretend straw.

As the child leaves toddlerhood, she is able to pretend more complicated and involved sequences, such as serving coffee to a group of dolls after having seated them at the table. The serving may be detailed, pouring coffee into each cup, placing the cup in front of the doll, and carefully spooning in cream and sugar. The content of the sequence is always something familiar and comfortable to the child, and does not require peer participation. However, this pretense play may often involve or even require an adult or older person who is willing to accommodate the child to extend the make believe scenario.

As the child grows into a preschooler, make believe becomes an important tool for social development, as the child begins to act out the third type of symbolic play in cooperation with other children. Through the roles that she herself plays, as well as the negotiating with peers, the child begins to realize that people have differing perspectives.

These reasons more than substantiate the need for caregivers to accommodate and enhance symbolic play in toddlers, both by their own participation, and by providing an appropriate physical environment. This being, providing a "make believe" area, with props that suggest enactment of scenes familiar to the toddler. These socio-dramatic areas need not be exotic; what the toddler is familiar with are the scenes he sees on a regular basis, ie. getting on the bus, driving, eating dinner, having a bath, even eating lunch at school. Pretend

kitchen appliances and dishes, with a table and chairs nearby, have produced many a "meal" by toddlers, most often then fed to dolls. The trained caregiver will realize the importance and the value of socio-dramatic play in the younger years as it evolves into a social tool for preschoolers and beyond. The caregiver who understands the development of symbolic play and how it will be compelled to provide and encourage socio-dramatic play.

TODDLER SOCIAL PLAY

In 1932 M.B. Parten conducted observational studies on children's social play. The results of that study, concluded that children progress through four predictable sequential stages of social play. Parten's first stage is solitary play, in which the older infant plays with objects, with no peer interaction. The second stage is parallel play, in which toddlers may be playing alongside each other, but without any regard for the other. They are engaged in solitary play, in mutual space.

In 1980 Carollee Howes identified stages slightly more precise than Parten's. Her second stage, following parallel play, is parallel play with mutual regard. Children functioning in this stage are involved in their own play, in mutual space, with mutual regard. They may acknowledge each other with eye contact, or by responding to each other's vocalizations. The next stage in Howes' progression is simple social play, in which each child engaged in the same activity directs a social bid to the other. This would include smiling, vocalizing, offering or receiving of an object. These are the stages typical of most two year olds. The last stages of both theorists, Howes' complementary and reciprocal play with mutual awareness, and Parten's

cooperative play, are of a sophistication that two year olds are usually not capable. Most often children of four years of age are functioning in these latter stages.

A physical environment needs to allow toddlers to engage in the types of social play in which they are functioning, whether it be solitary, parallel play with or without mutual regard, or simple social play. In designing a space for use by a group of children of any age, it is desirable to have the furniture arranged to accommodate children when they wish to play alone, as well as when they wish to play in a group. Providing a few "private spaces, small enclosed places, or even large boxes to crawl into allows the occasional retreat from the group, or private time with one other. There has been research (Phyfe-Perkins 1980, Sheehan and Day 1975) on the effects of open spaces vs. smaller spaces on children's play. These studies on groups of preschool children suggest that smaller partitioned areas result in higher quality play than big open spaces.

It is examples such as these that exemplify the need for caregivers to be able to "keep up" with current research. Quite possibly information such as this might not make it into a caregivers original training. Ongoing training allows caregivers access to recent findings which they may not otherwise discover, and which would be immediately useful in their program implementation.

Research by Mueller and Lucas (1975) indicated that toys serve to facilitate social interactions between toddlers, who are yet unable or unwilling to make accommodations to peers to sustain play. More recent

research (Jacobson, 1981) indicated that social interactions between peers increases in sophistication as a result of accumulated interactions, and that toy use is not as influential in this process as has been thought. Jacobson found that early social interactions occurred first in a non-object centered context. Also, long social interactions emerged simultaneously in object centered and non-object centered contexts in children between 10 and 12 months. This indicates that the social skills develop at this stage regardless of presence or absence of toys. In the second year toddlers progress in their social development through both toy use with peers and interaction with peers. Toys do not facilitate the initiation of social play with toddlers, but they do enhance social play. This provides yet another valuable reason for sufficient toy availability.

TODDLR MOTOR PLAY

Toddlers are newly mobile. Much of their play is practicing this mobility, or playing with it. Toddlers will often practice walking with different techniques, or speeds, for example walking backward, walking with a stride, walking along a trail, walking on their toes, and running, to name a few. Space must be available to explore this new skill. Toddlers climb. They climb what is available. If appropriate climbing apparatus is not available, they will climb on what is available, regardless of appropriateness. Teachers who have experience or training only with preschool age children will expect to be able to "reason" with a toddler why not to climb. The knowledgeable toddler caregiver will have some kind of indoor climbing apparatus available throughout the day. Those who do not provide this option in the physical environment, have unwittingly created a situation in which

they will inevitably consistently influence the social-emotional environment with their attempts to get the children off the windowsills, the chairs, each other, and anything else there is possible to climb. This is one method of exploring one of the most interesting objects to a toddler, his own body.

Another method of this "own body" exploration is climbing into things. A tub, a box, even a dish pan will do. The object being climbed into need not be big enough for the entire child, only part. If two feet, or one foot or a bottom fits in, that will satisfy the explorer. Many climbing apparatus sets can accommodate both the climb onto, and climb into activities. A preschool child would be less entranced with fitting body parts into things.

Space and consideration must be given to the large motor needs of the toddler both inside and outside. Alternatives to manufactured climbing sets for indoors are mattresses set on the floor to climb onto, large pillows to wiggle on and cuddle into, and large boxes to climb into using the whole body. There are many items that can comfortably fit "part" of the toddlers body. The trained caregiver will also consider the outdoor play space, and provide not only space to run, but also things to climb.

One of the physical, hands on, large motor learning activities toddlers enjoy and practice frequently is the dumping of toys. Early childhood educators who have only had exposure to preschoolers may respond to continual dumping as a disciplinary issue, rather than an exploratory issue. The caregiver with experience with toddlers will maintain manageability by limiting the number of toys available at any

given time, thus limiting the quantities of potentially dumped toys at any moment, and will rotate the available toys to keep "new" appeal, and provide a variety and quantity of objects over time. This appeals to cognitive development as well.

SPECIALIZED TRAINING IS NECESSARY

As toddler play is both qualitatively and quantitatively different from that of children younger and older, a developmentally appropriate environment must therefore also be qualitatively and quantitatively different from those for children younger and older. No amount of training in preschool children's development will adequately prepare a caregiver for working with toddlers. Caregivers who do not receive adequate training for working with toddlers will not have the knowledge of toddler development necessary to provide an appropriate physical or social-emotional environment.

Early Childhood Education has traditionally meant preschool age children. As more and more parents are placing the day-time care of their infants and toddlers in the hands of "professionals", they have every right to expect that people with early childhood credentials will have the background knowledge and experience to provide a nurturing, safe, and at least a developmentally appropriate environment. The rationale has discussed how toddler play and development is different from that of preschool age children. The rest of the project will examine how well a sample of toddler caregivers are providing an appropriate environment and meeting the developmental needs of their children. It will also examine whether they have or have not had specific toddler training.

METHODS

Given what is known about toddler play, and how it differs from a preschooler's play, we also know that toddler needs are different from those of preschool age children. The questions remain; Are toddler teachers providing appropriate environments for toddlers? Are toddler teachers receiving the training they need to provide appropriate environments? What training do toddler teachers need?

EVALUATION TECHNIQUES

In order to best ascertain the training needs of toddler teachers, they must be consulted, and observed. A three way approach consisting of, 1) teacher interview, 2) director interview, and 3) program assessment tool, was decided upon.

Teacher Interview

The teacher interview was designed to determine the teacher's views and perceptions of the training available to her to provide quality care for toddlers. Pre-service training and experience, and inservice training were addressed.

Each teacher was asked her views on:

-What areas she might benefit from (be interested in) pursuing additional training.

-What has been most influential in how she runs her program.

-The validity/usefulness of the training she received.

It was hypothesized that the teachers interest in additional training in certain topic areas would reflect a need for more training in those areas. Topic areas were determined with references to articles on staff and parent training for caregivers of infants and toddlers, as well as CDA literature. (Harmon 1985 & CDA. 1989). It was also hypothesized that whatever experiences have been the most influential for teachers in the way they run their programs, as well as teacher's views on the usefulness of the training they did receive, would reflect on the relative usefulness of the types of training currently available to caregivers of toddlers.

Teachers were also asked about their awareness and/or knowledge of their center's policies and administrators' support regarding ongoing training issues, such as release time, financial compensations, and incentives. The revealing of these issues would portray some of the obstacles and encouragements caregivers of toddlers face when considering further training.

Teachers preferences of scheduling format would indicate what would best suit the full time caregiver of toddlers who wishes to pursue additional training.

Director Interview

The director interview was designed to determine the director's assessment of the toddler teachers skills and abilities, and to determine in what areas the director thinks the teacher would benefit from additional training. The same list of topic areas was presented to the teachers and the directors for accurate comparison.

The director interview also elicits what the center's policies concerning ongoing teacher training are. Center characteristics, such as numbers of children and staff, special criteria for enrollment, and center philosophy, which may effect teacher's feelings of competency and efficacy, are asked of the director.

This interview also attempts to determine the director's impression of the availability of trained, experienced, "qualified" toddler caregivers, in relation to the availability of "qualified" preschool teachers. If it is equally difficult to find qualified preschool and toddler caregivers, then the issue is NOT about adequate training for toddler caregivers, it is an issue of adequate training for all caregivers.

Objective Program Assessment

An objective program assessment tool is necessary to objectively determine in what areas the teacher is and is not providing sufficient care/stimulation/planning. This assessment would then point towards which areas the teacher would benefit most from additional training.

The use of an objective assessment tool would counter balance effects of the director's values in assessing the teacher. The directors' values in what constitutes quality care may already be reflected in her choice of staff. For example, a director who feels strongly that cognitive development is important, and motor development is not, may be hiring staff who share the same values. In addition, even if a director sees that a teacher is not providing adequate experiences of certain type, she will not likely say that teacher needs

more training in that area unless she feels it is important. If it is not important to the director, and the teacher does not recognize her own need, the need may get lost. Thus an objective assessment tool is necessary.

The results of the use of this objective assessment are valid indicators of where additional training is needed. Unless a teacher has received sufficient training and is able to transfer her knowledge into practice, or has adequately bridged any gaps in her training in other ways, there will be gaps in the program that an objective assessment tool will zero in on. Additionally, the results will be looked at with consideration to areas the teacher indicated she would be interested in further training. This would reflect degree to which the teacher is aware of her areas of weakness.

A usable comprehensive assessment tool appropriate for use in day care programs serving one and two year old children was sought for use. "Comprehensive" in this case meant a tool that assesses at least the two most salient components of a day care program. These two most salient components are the social-emotional environment, as reflected in adult-child interactions, and the physical environment.

Abundant literature and research has documented the most salient feature of a child care program to be the caregiver-child interactions. Interestingly, beyond the well documented research on the necessity of objects for very young children to explore and manipulate, there is a relative dearth of research examining the direct impact of the physical environment on child development. More interestingly, in spite of this imbalance of emphasis toward the social-emotional environment, the vast

majority of program assessment tools focus very heavily on the physical environment, with minor, if any, consideration of the social-emotional climate.

The Search for A Program Assessment Tool

Possibly the most widely used early childhood program assessment tool is the "Early Childhood Environment Rating Scale" by Harms and Clifford, popularly known as the E.C.E.R.S. The ECERS is designed for use in preschool programs, and provides 37 rating items with inserted accommodations for infant and toddler programs. The ECERS in fact rates the "environment" as it has been popularly interpreted, with a heavy emphasis on the physical environment, and minor consideration of the adult-child interactions. While there certainly are references to areas of interactive care such as, for example, language stimulation or personal grooming, the ECERS for the most part measures these in terms of availability and accessibility of appropriate materials. The components of the character of the interaction, or the extent of the child's participation, are lost. In fact, a review of the preface of the ECERS reveals that the authors originally intended to exclude interpersonal relationships from this rating scale entirely, but found it "impossible" to do so. In the preface, the authors comment: "Thus a number of items are included on staff-child interaction. Another instrument, designed to examine interpersonal interaction in greater detail, is being planned." Clearly, even the authors of the ECERS recognize that it does not nearly adequately measure the dimension of adult-child interactions. Thus, despite it's widespread and growing popularity, the ECERS proved to be inadequate for use in this study, as it is not a comprehensive program assessment tool.

The High/Scope Program Implementation Profile (P.I.P.) is a comprehensive program assessment tool that rates the degree of implementation of the High/Scope curriculum in a preschool classroom. While the High/Scope curriculum was developed for use with preschool aged children, the philosophy of providing developmentally appropriate experiences and supporting active exploratory learning need not be specific to any particular developmental level. Nonetheless, actual implementation of a philosophy must be measured in concrete terms. The PIP specifically addresses what is "developmentally appropriate" in a preschool classroom by examining the physical environment, daily routine, adult-child interactions, and adult-adult interactions.

This program assessment tool was considered specifically because of it's comprehensive approach in identifying and assessing many factors of the preschool experience, and because of it's clear articulation of the means of measuring the presence of developmentally appropriate experiences. Obviously, a tool specifically designed to assess a preschool program is not appropriate for use in assessing a toddler program. For this reason, the High/Scope PIP was also determined to be inadequate for use for this project.

Other program assessment tools were considered, but proved to be less mention worthy than the above two. The usual infractions were either narrowness of focus, ie. only an examination of physical room arrangement, or a checklist for a some of the areas of programming with varying degrees of effectiveness in their adaptations from their original uses as preschool program assessment tools. Thus the search for potential program assessment tools failed to reveal any one in existence that is both comprehensive, and appropriate for use in

toddler, or infant and toddler programs. Therefore, this author had no recourse!! but to develop an assessment tool which would be usable for this project.

By drawing on the usable elements of the above mentioned assessment tools, and references to others not nearly as refined as those mentioned above, as well as personal experience with toddlers in group care, this author created the Toddler Program Profile, hereby referred to as the TOPP. The Topp attempts to fill a gaping hole in the resources available to caregivers of very young children, by providing an effective, comprehensive, program assessment tool appropriate for use in programs serving one and two year old children. While an objective program assessment tool was needed most immediately for the purposes of this project, the TOPP was designed with consideration to future use by others.

The TOPP resembles the High/Scope PIP in it's format. It is divided into four sections, (same as the PIP), with twenty eight items (less than the PIP) to rate along a five point scale, with space to write notes after each item. The four sections encompass the physical environment, the daily schedule, adult-child interactions, and adult-adult interactions, thus fulfilling the comprehensive criteria.

The TOPP contains revisions of some of the existing PIP and ECERS items, now reworded and redefined to be toddler appropriate. Thus, the criteria for the desired assessment tool to be appropriate for use in programs serving one and two year old children is fulfilled. Rewording or elimination of items or phrases referring specifically to High/Scope curriculum implementation makes the TOPP usable in non High/Scope

toddler programs. Therefore, the newly developed Toddler Program Profile completes the third element of data collection for this project, as an objective, comprehensive, usable, program assessment tool appropriate for use in programs serving one and two year old children.

SAMPLE SELECTION

The sample centers were chosen from a list of day care centers compiled by the Child Care Coordinating and Referral Service of Washtenaw County. The list represents centers in the Ann Arbor-Ypsilanti and Out-County areas, and has notations on ages of children served, and coding for characteristics such as full time only, employer sponsored, and drop-in, etc.

Primarily, those centers that offered full time care to one and two year old children were considered eligible for inclusion in this study. In addition, it was preferred for the center to also house a preschool program, so that directors views on relative availability of qualified toddler vs. preschool staff could be addressed. Directors of the eligible centers were contacted and invited to participate. Nine of the twelve directors contacted agreed to participate, and seven of these nine were able to actually schedule the interviews. The first center visited turned out to be an infant toddler center where the director and assistant director were the qualified teachers, and the rest of the support staff were part time. Because of this, and the fact that there was no preschool program to compare staff availability with, this center was eliminated from the study. The remaining centers are referred to as Centers #1 through #6.

Center #1

Center #1 is located in part of a converted elementary school, which now houses a number of community services as well as this originally employer sponsored day care center. Due to lack of use by work place employees, the center is completing it's transition to becoming self-supported. Fifty eight children ages six weeks through five years are served in four groups, ages six weeks to eighteen months, eighteen to thirty months, (two and a half years), two and a half to three and a half years, and three and a half to five years. Each group has one very large open room, with windows on two walls looking onto the very large communal space, used mostly for gross motor activities, and the playground, as well as direct entries to each. Each room also has a small additional adjoining area for storage of children's personal belongings.

There is one lead teacher in each room, and three associate teachers in both the infant and the toddler rooms. Lead teachers are required to have a four year Early Childhood degree. Associate teachers are required to have completed some college coursework in a related field, and have some experience with groups of children. This lead toddler teacher has a four year Early Childhood degree, and has worked at this center since it opened almost two and a half years ago. She works 37.5 hours per week and earns $7.90/hr., with ten vacation days and five sick days per year.

Center #2

Center #2 is independently owned by it's director and three others. This center has been open less than a year, and is run by the director/owner who co-owned her previous center for fifteen years before selling. The setting is a brand new space, a converted squash and racquetball club. Some of the staff from the previously owned center are employed here, and infants and toddlers are now included. The center is licensed for 145 children, and currently serves 126 children, about half full time and half on a part time basis.

The very large reception area is immediately striking by it's large size. The classrooms are situated in what were racquetball courts, all uniformly situated on both sides of a long hallway. All rooms are equipped identically, with a kitchenette including bar fridge, sink, microwave oven and food storage areas, and an observation room/staff office and toy storage rooms immediately to the left and right upon entering. Four staff and sixteen children ages 14-30 months occupy the toddler room. A visitor becomes aware of the feeling of "newness" of the space, evidenced by the clean white formica cupboards, the clean white walls, the new toys, and the empty rooms yet uninhabited and so used as spare rooms by some groups.

There are three levels of teaching staff in center #2; leads, associates, and assistants. Lead teachers may have a four year or two year child development Bachelor or Associate degree. Associate teachers must have some type of two year degree. Assistant teachers, who are generally part time or substitutes, must have some kind of experience or background with children. Teachers may move up through the ranks without additional training.

In interviewing both the director and the toddler lead teacher, it became clear that the director is careful about who she hires, and then leaves the programming to them. The lead teacher commented repeatedly on the value of the administrative support she receives at this center. This toddler lead teacher came into this position with two Associate degrees, and two years of full time day care experience, some of this with infants, and some as an assistant director. She has worked at this center since it opened, and earns "over $7.00/hr."

Center #3

Center #3 is a work place day care situated in it's own building on the work place site. These two buildings stand isolated in an undeveloped area of the city, where the day care is visually separated from the office building by a solid fence. The exterior of the center looks like a large house, with bright colored trim and animal shaped mobiles hanging outside. Inside, the open kitchen and the large motor room are the hub. The floor to ceiling windows in the large motor room, which look onto the playground, and the high ceilings through most of the center contribute to a positive feeling of openness. All the group spaces are along the sides of the building, with only the infant sleep room and the toddler spaces, as well as the office and the staff room at the front, having closing doors. The toddler space is exceptionally small, with very few shelves at toddler-reachable level. They have adopted the large motor room, which is immediately out their doorway, practically as their own.

Groupings of the children were described in terms of developmental levels, both motorically and socially, with age used as a coincident reference. (ie. new walkers and bold walkers, parallel players and interactive players...) The infant group has two staff and five children, the toddler group has three staff and nine children, broken into two groups so as not to have more than five or six toddlers in a group. Children ages 30 months through five years are together in one group.

All full time staff are team teachers with equal qualifications, with no assistants or aides. The director commented that having credentials in early childhood has no bearing on supervisory skills. It is preferred for team teachers to have four year ECE degrees, but a two year degree may be accepted. The staff are salaried, and get all the benefits provided to employees of the company. Flex-time is offered for overtime compensation. This toddler team teacher began working here when she finished her degree nine months ago. This is her first full time position. She earns an annual salary of $14,000.

Center #4

Center #4 is a Montessori based center, licensed for forty three children, currently serving thirty children, aged from infants to five year olds. There are four infants with one adult, and ten toddlers with a head teacher and an aide. The center is in a converted house on a residential street, a block away from downtown. The director and teacher were willing to participate in the interviews by telephone. After unsuccessful attempts at scheduling a visit, they indicated they were unable to schedule a visitor at any time.

The director indicated that at least an Associate degree was required for lead teachers, as well as Montessori certification. Successful applicants with an Associate degree must have experience working with the age group, applicants with a Bachelor degree may or may not have experience. The current toddler teacher indicated that this is her seventh year working at this center, and her fourth year working with toddlers. She will be going this summer for the one month Montessori Zero-to-Three certification. She declined to state her rate of pay.

Center #5

Center #5 is a branch of a national day care chain. Current enrollment is 81 children during the day, plus 10-15 school children in the "Before and After" school program. The center has it's own building, on a busy street. The walls are brightly decorated with colorful pictures and bulletin boards. The areas designated for most groups are partially separated from each other by three foot high dividers. The infant-toddler area is a separate room with full walls and closing doors. These two programs essentially function separately, with a shared diaper changing area between them, which also allows for staff communication. Most areas have direct access to the playground. There is no indoor gross motor room, or staff room.

Center #5 requires teachers and assistants to have a high school degree or equivalent. The director indicated there is a twelve week on site training program for new staff, formatted by the chain, and carried out by the director. The teachers indicated that in their experience with the previous director the training consisted of the

handing over of materials to read, with no follow up. This director has been at this center for six weeks, after having been an assistant director at another branch for five months, following two months as a teacher in the four year old group. She has a Bachelor degree in social work, and ten years of unrelated work experience.

The toddler teacher in Center #5 is also a registered nurse. This is, in her words, her "fun job", which she does in addition to her "real job". She works double shifts in a hospital on the weekends, and thirty hours in four days per week at the day care. She has no specific early childhood training, but her informal training includes her pediatric rotation in her nursing training, her own four children, and a six hour workshop for teachers of four year olds. There are eight children age 13-14 months to two and a half years and two staff in this group. This teacher's responsibilities at the center include driving the van to pick up the after school children at 3:00 every day, so she is out of the program during that time. She has worked at this center for almost two years, and earns $5.00 per hour. As she has been employed more than one year, she pays only half the fees for care for her one child in the center. The other teacher has worked at this center for six months and earns $4.50 per hour.

Center #6

Center #6 is an independently owned for-profit center. Visible from a major road, this less than one year old center was built for it's current purpose, and looks like a very large house. All the rooms have windows facing the large central gross motor room, where equipment is always set up. The equipment and supplies are all brand new and

store-bought. The sparsely decorated walls have a few posters. An emphasis in this center is a multi-cultural existence, with evidence of this awareness reflected in the posters and books. Enrollment is building slowly, and the center now serves 30 children ages 2 weeks to five years. Ultimately the center could be licensed for 120 full time children. Currently, most of the children are part time, and are divided into three groups, infants up to 14 months, 14 months to 2 1/2 years, and preschool till kindergarten entry. At this time there are five toddlers, all part time, and one teacher.

The director indicated that each class has a lead teacher with a four year degree. Assistant teachers may have a two year Associate degree, or experience in another day care center. The toddler teacher had just started working the same week she was interviewed. She is working full time while completing the last two classes for her Bachelor degree. The director's rating of areas this teacher would most benefit from additional training was completed two weeks after the initial visit and interview. At this center, full time for staff means forty hours per week. This is this teacher's first full time position, and she is earning $7.00 per hour.

This is not meant to be, nor is it a representative sample of all day care centers. These centers are all licensed. They are almost all for-profit centers. They almost all have their own buildings. There are many more varieties of day care available in most communities. This is but a small sample.

RESULTS

This chapter will discuss the results of the teacher and director interviews, as well as the results from the Toddler Program Profile assessment of the participating toddler programs as they apply to the training needs of the teachers. The results are discussed in terms of specific areas of teacher competency.

DIRECTOR AND TEACHER INTERVIEW RESULTS

Directors were asked in the interview **"What training or educational background must a person have to be considered eligible to be a teacher or assistant at this center?"** Center to Center, directors have varying requirements for what they seek in their lead teachers. In terms of educational background, these directors make no distinctions in what they requirements for toddler staff and preschool staff. Of the six directors interviewed, five require some sort of post secondary education, four of them require Early Childhood Education training. Of these five, one director requires the lead teacher to have Bachelors degrees in Early Childhood Education, and one strongly prefers it. One director requires a four year degree in a related field. Two directors require lead teachers to have two year Associate degrees in Early Childhood Education. One Center requires only high school graduation.

In terms of experience, three directors indicated they looked for more experience in toddler teachers than they did in preschool teachers. They indicated that for working with preschoolers, training without experience was acceptable, both because ongoing training

opportunities for teachers of preschoolers are available in terms of workshops and other resources, and because one can reason at least to some extent with preschoolers. They indicated that they prefer to require previous work with toddler groups for toddler teachers, as energy, flexibility, and on the spot decision making requirements on the job are greater. One director said "Toddler teachers work the hardest. If they don't have experience, they won't last." Are these directors able to find what they require?

ACTUAL QUALIFICATIONS

In the interview, directors were asked, **"When you are hiring new preschool/toddler staff, how easy is it for you to find people with the training and experience that you seek?"** Of the five directors who have experience in hiring, three responded that finding toddler staff is "very difficult", "really difficult", and one indicated she does not find people with training and experience with toddlers. In comparison, the same three directors commented that finding preschool staff is "easier for preschool than toddler", "quite easy", and "not too bad". The one director who requires Montessori training said it is equally difficult for her to find preschool and toddler teachers. The director who has just opened a new center that includes infants and toddlers, said she thought that finding infant staff is difficult, but finding toddler staff is not difficult. Although she was not hiring infant or toddler staff in years past, she thought that five years ago hiring toddler teachers would have been difficult, but not today. She also finds looking for preschool staff is "pretty easy". While she did indicate that it is not difficult for her to find toddler staff, one can wonder whether there is a difference between "not difficult" for toddler, and "pretty easy" for preschool.

TEACHERS' PERSPECTIVES ON THEIR TRAINING

When the teachers addressed the question, **"Do you think the training you received prepared you adequately for working with children?"** all five who had training answered "yes". When they were asked whether they thought the training they had received had prepared them adequately for working with toddlers, the answers were still positive, but less definitely so, as many of them included comments or qualifiers. As indicated in Table 1 those teachers who said they had toddler training all referred to their practicums as their toddler training. Although no one specifically stated that the practicums were the extent of their toddler training, there were no references to or mentions of any classes, lectures, or any other training experiences in relation to toddlers.

In so far as practicums seem to provide the extent of the toddler specific training, it becomes more interesting to realize how many of the teachers commented on how little time they spent in toddler practicums compared with time spent in practicums with preschoolers. Moreover, what emerged later in the interviews with two of the teachers, was that in the places they did their practicums, "toddler" in one case meant children who were at least 2 1/2 years old, and in the other case meant children who were 2-3 years old, as the teacher said, "if you got your practicum early in the year. If not, you missed it, there are no young two's anymore by mid year." So, for some of those teachers who said they had toddler practicums, and more generally of teacher training programs that seem at initial glance to provide practical experience with toddlers, a closer look reveals that in some

TABLE 1

TEACHER BACKGROUND

	CENTER #1	CENTER #2	CENTER #3	CENTER #4	CENTER #5	CENTER #6
HOW LONG WORK WITH CHILDREN	3yrs PT 4yrs FT	4 yrs PT 4 yrs FT	4yrs PT 9mos FT	3yrs PT 7yrs FT	2yrs	4yrs PT
TRAINING	4yr EC deg.	2yr EC deg & 2yr General Studies	4yr EC deg	2yr EC deg	Nurse	almost 4 yr deg B.A. Psych.
TRAINING WITH TODDLERS	5 week practicum	3 practicums*	10 week practicum*	practicum	nursing training pediatric rotation	none
WORK WITH TODDLERS	1yr 10mos.	9 mos	9mos	4-5yrs	2yrs	1yr PT

INFLUENCES

OVERALL	college training in observing children	seeing other centers	college & colleagues	director	own children	other centers worked at
SET UP ROOM	observing children & trial & error	---	team partner & trial & error	director	corporate policy manual	NA
DAILY SCHEDULE	trial & error	books & trial & error	college	director	corporate goal book	NA
ACTIVITIES	own ideas & prev exp with preschoolers	books	college scale down from pre-primary	Montessori curriculum	corporate goal book	NA
OTHER		administrative support			growing up without TV	

*toddler practicums for teacher #2 meant children age 2 1/2 - 3 years, and for teacher #3, children age 2-3 years, if you got a practicum early in the year!

cases, toddler training actually means little or no experience with children under two and a half years of age.

Of the two teachers with four year E.C.E. degrees, one said her program prepared her adequately for working with toddlers in terms of setting up the room, but not in terms of activity ideas or giving enough experience. The other teacher with a four year E.C.E. degree said although she had chosen mostly preschool to do her practicums with, she felt she learned how to scale things down. The teacher who is working on completing her Bachelor degree in psychology, felt her training was sufficient, but that she would change it to include more hands on experience with different age groups.

Of the two teachers who have two year Associate Degrees, one is now in center #4 with a Montessori curriculum. She completed her Associate degree seven years ago, and has had no formal Montessori training. She feels that her original training was sufficient. The other teacher with an Associate degree thinks her own training was sufficient, but that some finish the program with insufficient knowledge. This teacher is now having difficulty with an assistant who came through the same program she graduated from, but seems to be unable to scale down her expectations to be appropriate for a toddler age group. This teacher says "The exposure is there, some students just don't grasp it." This teacher also commented of others she has worked with -"four year people are more geared to elementary age. They can then gear down to preschool age. Gearing down more than that is tough."

When asked directly, the teachers did indicate that they felt their training had generally been sufficient. However, when asked about what has been most influential in the way they run their programs, college training does not stand out as having been significantly more influential than other types of experiences. (See Table 1). Teachers were asked "**What experiences have been the most influential in how you run your program?**" They were then asked more specifically about what has been most influential in they way they; a) set up the room, b) daily schedule, c) activities, d) other. Of twenty potential mentions, (five teachers with college training, multiplied by four areas) college was mentioned as an influence four times, an equal billing with "trial and error". The two teachers who do mention college as an influence in the way they run their programs were the two teachers with four year ECE degrees. None of the other teachers mention college training as having been an influence in their programming. Exposure to other centers is mentioned twice as being an influential experience.

The two teachers who have two year Associate degrees seem to respond to very different influences. One seems to be relatively resourceful on her own, finding books, and drawing on exposure to other centers and administrative support. The other seems to be following the director's lead in all areas of programming, and is directed by the center's Montessori philosophy for her curriculum and her own philosophy.

In this type of situation, as well as in Center #5 where there are no educational requirements for staff beyond high school, and all programming and goals are set and provided in corporate goal books, the

organization of the centers seem to attempt to minimize the effect and the efficacy of the individual teachers.

Centers cannot minimize the effect of individual teachers on children despite providing a plethora of written material or director "directives" on center policy. Every interaction between teacher and child will be permeated with that teacher's philosophy, training, and experience, or lack of philosophy, training, and experience in childcare. The most salient feature of childcare is still the adult-child interaction. If these centers are operating under the premise that they can mechanize childcare by providing written guidelines, however extensive, there is a very definite question of program quality throughout center. These issues do not minimize the validity of the examination of training for caregivers of toddlers, but extends it to a question of training for caregivers of all children.

TEACHER IDENTIFIED TRAINING NEEDS

The teachers were asked "**If you could take additional training now, what topic areas would interest you?**". Teachers then either provided a response of their own or not, and then were asked about each of eighteen topic areas.

The results were as follows: (See Table 2). There were seven topics in which many (five or six) of the six teachers felt they would benefit from further training. These topics were; **Fostering social emotional development, discipline and limit setting, special needs, constructive room arrangement, safety, team teaching,** and **involving parents.** There was only one topic area in which one or no teachers were interested in further training; **screening and record keeping.**

TABLE 2

POSITIVE RESPONSES TO TOPIC AREAS TEACHER WOULD BENEFIT FROM FURTHER TRAINING.

	DIRECTORS	TEACHERS	TOTAL
early childhood develomental milestones	3	4	7
providing for language development	3	4	7
fostering social emotional development	4	6	10
planning for cognitive development	3	3	6
enhancing motor development	0	4	4
developmental theories	3	2	5
play and young children	3	3	6
discipline and limit setting	4	6	10
special needs	3	5	8
adult child interactions	1	3	4
daily schedule	0	2	2
constructive room arrangement	4	5	9
screening and record keeping	1	1	2
good nutrition	1	3	4
health	4	4	8
safety	2	5	7
team teaching	1	5	6
involving parents	5	5	10
other	1	5	6

DIRECTOR IDENTIFIED TRAINING NEEDS

Directors were asked "In what areas could your toddler staff best benefit from further training?" and were provided with the same list of eighteen topic areas. There was only one area many (five or six) directors thought their toddler teachers could benefit from further training, that being **involving parents.** There were six areas few (one or no) directors thought their toddler teachers could benefit from further training. Those topic areas were; **enhancing motor development, adult child interactions, daily schedule, screening and record keeping, good nutrition,** and **team teaching.**

In comparing the answers of the teachers and the directors, the following emerges. In all the centers the teacher said yes to more topics than the director. In fifteen topic areas, more teachers than directors felt more training would be beneficial. In the other four areas, an equal number of teachers and directors felt additional training would be beneficial. There were two topic areas that revealed a wide discrepancy in comparing all the directors and all the teachers. These topic areas were **team teaching,** and **motor development.**

The four topic areas with the highest number of "yes" answers from teachers and directors combined were; **fostering social emotional development, discipline and limit setting, constructive room arrangement, and involving parents.** Perhaps it is worthy to note that the only "no" responses concerning parent involvement were from the teacher and director from center #5, the one center that is a branch of a national chain. All the directors and teachers in all the other centers answered yes.

WHAT CENTERS DO TO ENCOURAGE ONGOING TRAINING.

Teachers were asked **In your opinion, does this center encourage ongoing training?** Two of the six teachers said "no", four said "yes". Clearly, what constitutes "ongoing training" varies greatly among teachers. In three cases, encouragement of attendance at local conferences constituted ongoing training, however inconsistent the encouragement might be. The degree of support varied, from vague verbal encouragement with no incentives in Center #4, to the paying of workshop registration fees, NAEYC membership fees, and purchasing of books in Center #2. To the participating teachers, a lead teachers' meeting every three weeks did not constitute ongoing training, but closing the center for half a day per year for training, did. The teacher in Center #6 who is completing her Bachelor degree while working indicated that because the director is allowing her to work and study, this to her meant the center encouraged ongoing training.

Directors were asked **"What is this center's policy regarding inservice training?"** Two centers, both in operation less than one year, did not yet have any formal policies. One of these, Center #2, regularly sends people to conferences and workshops. The center pays registration fees, and the staff person pays transportation and lodging if necessary. The center will compensate for conferences and workshops, but not for university classes.

Centers #1 and #3 are both non-profit centers. This does not seem to affect their training reimbursement/release policies as compared to the other centers. The director of Center #1, indicated that the center would "informally" pay toward additional training, "like a seminar, not a[n ongoing] class." It is unclear what "informally" means in practice.

The director at Center #3 compensates any training time or staff meetings with "flex time". (Option to the staff member to take overtime pay or time off.) She says the center will contribute to conference fees as much as the budget allows. Releasing the staff during the work day depends on the availability of a sub, and the cost of the conference/workshop. This director tries to support her staff to pursue ongoing training, and says of workshops not immediately directly applicable, "If it's not training, it's expansion."

In all the above centers, the center pays the substitute teacher, and pays or at least attempts to pay toward registration fees. Ongoing training encouragements are less tangible at the following three centers.

The director of Center #6 is currently working on the employee benefit package, which would also address educational reimbursement.

The teachers at Center #4 will be reimbursed for training if it is something they are required to take, but not for personal development. The center only requires Montessori training. The current toddler teacher has been at the center for six years, and is scheduled to be going for her Montessori training shortly. If teachers want to attend local workshops, they may take personal leave time to do so.

Center #5 is a branch of a national day care chain, where no early childhood background is required. The chain provides a 12 week training program, to be supervised by the director or assistant director. The toddler teachers indicated that in the past this was a handing over of materials to be read, with no follow up. They did not

know how this might change with the new director. The new director has a Bachelor degree in Social Work, ten years work experience in sales unrelated to childcare, and has worked for the chain as a teacher and assistant director for a total of eight months.

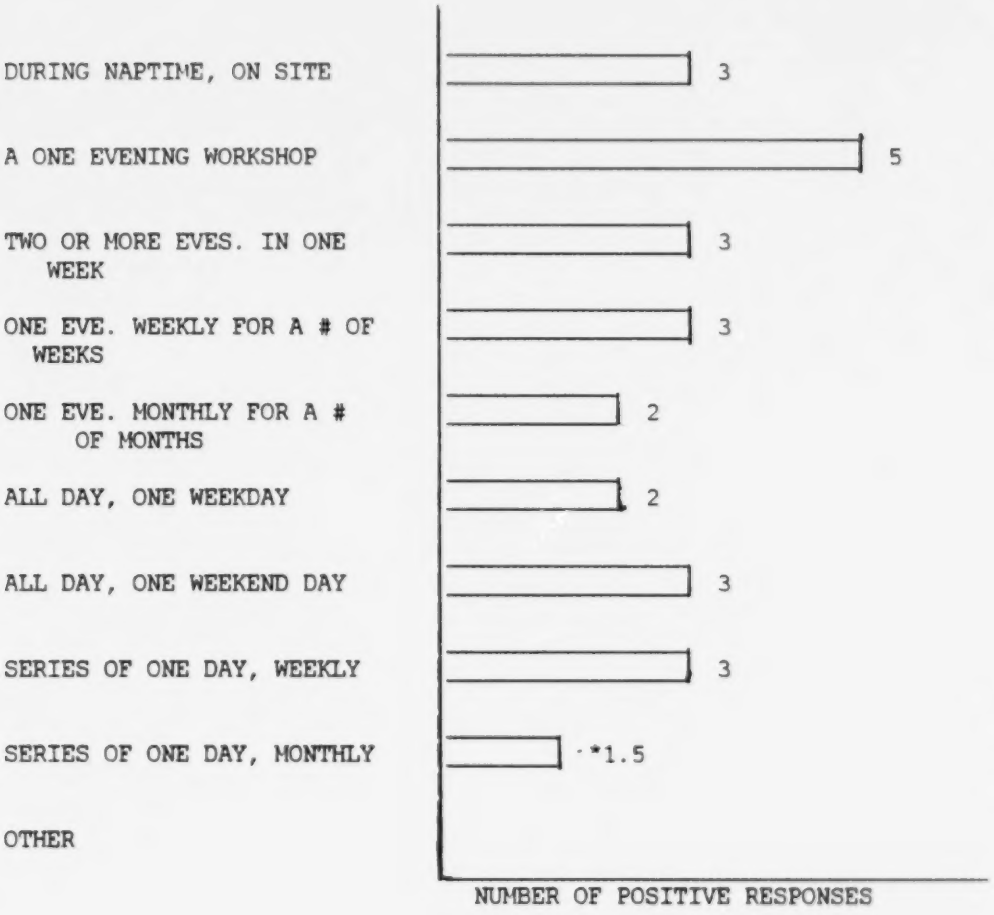
As for inservice training in Center #5, the director said "We don't really use it that much." Directors go for a total of seven days of training with the district manager, followed by monthly meetings. When this director was asked "...**has any staff person approached you to discuss further work related training?**" she indicated that this has happened, and responded, "we have manuals and binders they weren't aware of." The director thought that staff would likely be reimbursed for attending local workshops. The toddler teacher indicated she had once asked for funding to attend a seminar and was denied. The chain provides "educational incentives" by offering to pay 75% of the fees for a degree track course, up to $500, if the teacher has been a full time staff member for at least one year.

GETTING TRAINING TO THE TEACHERS

In their interview, teachers were asked "**Assuming the topics to be covered were of great interest to you, how would the following training formats suit you, and fit into your schedule?**" A list of training schedule formats was then presented for comments on suitability. (See TABLE 3). Tabulated results indicate the training format most toddler teachers responded to is the **one evening meeting.** Five different formats warranted second most responses. These are **at naptime, on site; two or more evening in one week; one evening per week for a series of weeks; all day one weekend day;**and **a series of one day**

TABLE 3

TIMES AND SCHEDULES TEACHERS PREFERRED FOR ADDITIONAL TRAINING



*When a teacher responded positively but provided qualifying circumstances, her response was tallied as 1/2 a positive response.

meetings, weekly. In Table 3 if teachers responded positively to one of the choices but included qualifiers, the response was tallied as one/half a positive response. Generally the teachers indicated they thought it would be difficult to schedule themselves out of their programs for daytime workshops.

RESULTS FROM THE TODDLER PROGRAM PROFILE

The Toddler Program Profile is the assessment tool developed specifically for use in this project. With twenty eight rating items, the Toddler Program Profile (TOPP) addresses physical environment, daily schedule, adult-child interactions, and adult-adult interactions in toddler day care programs.

Application of the TOPP to the classrooms reflects in a concrete way the areas in which the toddler teachers could benefit from further training. Some TOPP items pertain directly to the topic areas that were presented to the teachers and directors for consideration of further training. The correspondence between TOPP items and the topic areas presented to the teachers for consideration is reflected in Table 4. The TOPP is in Appendix C.

Table 5 provides the actual scores from TOPP items relating to the topic areas teachers and directors were asked about. Scores for Center #4 are not provided as the director was unable to schedule a visit at any time. Potential scores vary from center to center according to what the rater was able to observe.

TABLE 4

SUGGESTED TOPIC AREAS AND CORRESPONDING QUESTIONS ON THE TOPP.

providing for language development	13, 14, 15
fostering social emotional development	7, 17, 18, 19
planning for cognitive development	12, 16, 17
enhancing motor development	8, 6
discipline and limit setting	14, 18, 19
daily schedule	10, 11
constructive room arrangement	1, 2, 3, 4
screening and record keeping	24, 25
team teaching	20, 22, 23
involving parents	26, 27

TABLE 5

ACTUAL SCORES FROM TOPP ITEMS RELATING TO TOPIC AREAS

	CENTER #1	CENTER #2	CENTER #3	CENTER #4	CENTER #5	CENTER #6
providing for language development	9/10	6/10	10/10		8/10	8/10
fostering social emotional development	14/15	5/15	13/15	NOT	11/20	10/15
planning for cognitive development	12/15	5/15	9/10		6/10	4/5
enhancing motor development	3/5	4/5	4/5	AVAILABLE	4/5	3/5
discipline and limit setting	13/15	6/10	10/10		9/15	8/10
daily schedule	7/10	8/10	9/10		5/10	5/5
constructive room arrangement	16/20	14/20	10/15		14/20	18/20
team teaching	2/10	9/15	14/15		7/15	N.A.
involving parents	7/10	7/10	10/10		8/10	6/10
screening and record keeping	8/10	8/10	10/10		7/10	6/10

*Potential scores vary within a topic area according to what the rater was able to observe.

TABLE 6

TOPP SCORES REPORTED IN PERCENT BY TOPIC AREA

	CENTER #1	CENTER #2	CENTER #3	CENTER #4	CENTER #5	CENTER #6	MEAN
providing for language development	90	60	100		80	80	82
fostering social emotional development	87	33	87	NOT	55	67	66
planning for cognitive development	80	33	90		60	80	68
enhancing motor development	60	80	80	AVAILABLE	80	60	72
discipline and limit setting	80	60	100		60	80	76
daily schedule	70	80	90		50	100	78
constructive room arrangement	80	70	67		70	90	75
team teaching	20	60	93		47	NA	55
involving parents	70	70	100		80	60	76
screening and record keeping	80	50	100		70	60	72
mean of percentages	65	60	91		65	75	

The raw scores in Table 5 are converted to percentages in Table 6 to provide a basis from which comparisons may be made. Each percent score is the number of points awarded divided by the highest possible number in that category.

In Table 6 the scores per topic area, averaged across all centers are reflected in the far right column. Average TOPP scores per topic ranged from 55% to 82%, with a mean at 72%. Only one score was below 65%. The average score per center is reflected along the bottom row. The TOPP did differentiate between centers, reflecting in each toddler program a score that is a combination of the influences of the center, and of the teacher. Of course it is understood that any wide variations that may have occurred are somewhat minimized when combined together into an average score.

TRAINING NEEDS IDENTIFIED BY THE TOPP

Team teaching is by far the lowest average score, and for two of the centers, it is their lowest score. In Table 1, five of the six teachers said team teaching is a topic they would be interested more training in. The sixth teacher is in Center #6, and does not work in a team, as small enrollment does not yet warrant it.

As measured by the TOPP, the topics with the next three lowest score averages across all centers are; **fostering social emotional development** (66%), **planning for cognitive development** (68%), and **enhancing motor development** (72%). (See Table 5). These are three of the four topic areas that were presented to teachers and directors that directly address toddler development and toddler play as it is distinct from the development and play of children of other ages.

All of the teachers and four of the directors responded positively to more training for the toddler teacher in each of; **social emotional development** and **discipline and limit setting**. Discipline and limit setting is a tangible and measurable expression of a teacher's understanding of toddler social and/or emotional development. However, within the structures of this project, both topic areas are combined into one, and the TOPP scores are compared to only to the teachers' accommodation of toddler social emotional development. When the connections between these two topic areas are acknowledged, then it is not so surprising that a) teachers and directors gave responses that reflected essentially identical perceived need for more training in both areas, b) the large number of positive responses for more training on both these topic areas is in fact supported by low scores on the TOPP.

A summary of the results from tables R & Y is justified. Table 2 shows that **fostering social emotional development** is one of the four areas the most teachers and directors indicated interest in further training. Table 5 shows that **fostering social emotional development** is the topic area with the second lowest score (66%) for the combined average of all centers. In two other areas in which directors and teachers indicated the most interest in further training, **constructive room arrangement** and **involving parents**, the TOPP reflected midline scores for the average of all centers (75% & 76%). On **Planning for cognitive development** the combined average score (68%) was negligibly higher than for social emotional development, and the interest was somewhat lower- three teachers and three directors. The trend

continued with a higher score for **enhancing motor development**(72%), and even less interest, four teachers and no directors.

The fourth topic area in which the TOPP specifically addresses toddler development and play is **providing for language development**. Of all ten topic areas this was the one with the highest average-of-all-centers TOPP score. For three centers this was their highest score, although not their only highest score. These toddler teachers on the whole are providing for language development better than they are for any other aspect of toddler development.

The remaining two topic areas that the most directors and teachers combined indicated interest in more training are, **constructive room arrangement**, and **involving parents**. **Constructive room arrangement** is another topic area through which the TOPP can concretely measure a teacher's understanding and responsiveness to toddler development and play. Five teachers and four directors indicated an interest in further training for the toddler teacher in room arrangement. On the TOPP the average score for all centers score in room arrangement was neither high nor low at 75%, the fourth highest score.

Five directors and five teachers indicated interest in further training in **Involving parents**. The only teacher and the only director who did not indicate that further training would be beneficial were both from center #5. This toddler teacher has had her own children in day care, and makes a daily effort to inform parents about their child's day, requests materials from parents, and schedules "tea-parties" at the end of a day for the children and their parents approximately five times a year. Like on **constructive room**

arrangement, the average for all centers score for involving parents was in the middle range on the TOPP, 76%, despite a perception by teachers and directors of high need.

CONCLUSIONS AND IMPLICATIONS

This study was undertaken to examine the training issues facing caregivers of toddlers in group care. If caregivers are being trained in institutions where "early childhood" means only children aged three to five years, questions arise concerning the adequacy and the quality of care these "trained" individuals are able to provide for children under age three.

In order to investigate the adequacy of the training six teachers received, they and their center directors were interviewed to determine how much training the teachers had, and in what areas teachers could best benefit from additional training. Also, their programs were observed to determine whether the care they were providing was appropriate to the specific developmental needs of toddlers.

As no objective, comprehensive, program assessment tool was found that would adequately assess toddler day care programs, the Toddler Program Profile (TOPP) was created for this project. Teachers and directors who had been interested in assessing their own programs agreed on the lack of a comprehensive usable program assessment tool appropriate for toddler care, and were interested and receptive to the TOPP. One director's written comments are found in Appendix D.

TRAINING NEEDS SPECIFIC TO TODDLER CARE

Four areas on the TOPP directly address toddler play and development as it is distinct from that of other age groups. Of those four areas, three are among the lowest TOPP scores earned in these

toddler programs. Team teaching was the lowest topic score, but as it is not a topic specific to toddlers it is discussed later in this section. The topic areas with the next three lowest score averages were; **fostering social emotional development, planning for cognitive development,** and **enhancing motor development.** Knowing, understanding, accommodating, and supporting children's development is precisely what the teacher-caregiver is supposed to be doing. According to the TOPP observation results these toddler teachers are either not knowledgeable about the developmental needs of toddlers, or they have not applied their knowledge to the running of their programs.

Four of the five centers visited hire teachers who have training in child development or early childhood, yet these "trained" teachers are not able to appropriately accommodate the unique needs of toddlers. Why? One possibility is that early childhood has traditionally meant preschool-age children, and apparently in today's teacher and caregiver training institutions, it still does. People graduating from universities and community colleges with early childhood or equivalent degrees more often than not have very limited, if any, training or exposure to children under two years old. Repeatedly throughout the interviewing process with teachers and directors the theme of the lack of toddler or infant and toddler training came through.

Teachers who originally said they had toddler practicums then revealed that in their schools "toddler" meant children over two or two and a half years. There was no opportunity for practical experience with children under two. None of the teachers mentioned that any lectures or classes had influenced the way they now run their toddler

programs. While universities and colleges do provide training and experience in working with preschool-aged children, they are not providing their students with the academic or practical training they will need to work with toddlers. One teacher commented "Centers seem to be more mixed-age now. There isn't enough training on infants and toddlers. It's like it's not publicly accepted or something. There needs to be more training for working with infants and toddlers." Teachers and directors are begging for more training for working with these very young children.

When she is looking for toddler staff, the director from center #3 often becomes disillusioned before she begins. She has been director of a center for eight years, and says she just does not find people with training and experience with toddlers. She commented "I know I'm not going to find them, so I've come to hate interviewing for those positions...I can't remember the last time I found someone with really good training." She is of the opinion that burn-out is high because toddler training is inadequate. Other directors also implicated lack of adequate toddler training as being responsible for higher turnover and accelerated burn-out rates for toddler staff. The teachers cited the characteristics of toddlers (high energy, constant testing) as being responsible for the same phenomenon. However, the characteristics of toddlers will not change. Early childhood and child development programs must be able to train their graduates sufficiently to be able to thrive in the work situations in which they will find themselves, and today this includes working with children under three years of age.

TRAINING NEEDS IN OTHER AREAS

Team Teaching

Five of the six teachers indicated they would be interested in further training in **team teaching**. Team teaching was not only the topic in which two centers received their lowest TOPP scores, but it was also the topic area in which the centers' combined average was lower than for any other topic, and fairly significantly so. The centers earned only 55% of the possible points on the topic. The next lowest average for a topic (fostering social emotional development) was 66%, or 11 percentage points above that for team teaching. According to these TOPP results, team teaching is definitely an area where these teachers could greatly benefit from further training.

A number of interesting points come to light here. First, is that team teaching is not a domain relevant only to those who work with children under two years of age; it applies to almost all caregivers, in almost all formal caregiving arrangements. Even though this sample consists of caregivers of toddlers, the bulk of their training was not specifically for working with toddlers, but was in "early childhood" or "child development". These teachers have had insufficient training in regard to team teaching, and they recognize this. This issue is relevant to all those involved in child care, not only to those working with toddlers. Teachers and caregivers of preschool-age children as well are receiving this same incomplete training, with deficits in effective team teaching strategies.

The second question that arises here pertains to the validity of directors' assessments of their teachers skills and/or concerns. Only

one director of the six indicated she thought her toddler staff could benefit from further training in team teaching. This is very different from the high interest expressed by the teachers themselves, and it differs greatly with the results from the TOPP observation. These directors are not cuing in to their teachers desires for more information on team teaching, or to an apparent need for more information on this topic.

There is a possible explanation for the discrepancy between the directors' perceptions and the TOPP assessment of the need for improvement in team teaching. The traditional and most widespread practice is for the head teacher to be responsible for all program implementation, planning and evaluation, and for aides and assistants to serve as "support staff", perhaps implementing some of the head teacher's plans with small groups of children, and doing the "manual chores" such as cleaning and tidying. This is a hierarchical model rather than a team model. The team teaching items on the TOPP look for sharing of responsibilities among all staff for program implementation, planning, and evaluation, or more of a team model. It is very possible that the majority of the teachers and directors are unaware of the possibility of this method of responsibility sharing, or are uninterested in pursuing it.

Teachers indicated they need something more in their team teaching approach, and that sense is confirmed by the low TOPP scores in this area. In the interviews, teachers in centers with a hierarchical model repeatedly commented on the lack of skills and sense of responsibility they found in their assistants and aides. The teachers were able to

pinpoint individual strategies that would remedy particular issues in the short term; ie. coach the assistant in effective strategies for getting children to the diaper change table. However, these teachers indicated that they felt these strategies were short term remedies, and that the feeling of an overall lack of cohesion among the "team" would remain. They seemed to want a greater cohesiveness as a team without knowing exactly what strategies would really help. Perhaps as the directors are not part of the day-to-day teacher-caregiver team they are unaware of the magnitude of this need.

Center #3 was the only center to earn a high TOPP score on team teaching. This is a work place center and is at least somewhat subsidized by the work place it serves. All the staff have early childhood degrees and there is no hierarchy among the staff. The director commented that she prefers this system, as having early childhood credentials does not mean one can adequately supervise support staff. Center #3 scored 100% on the TOPP in at least four topic areas, as well as having an overall TOPP score significantly higher than any other center. What is known is that this center provides quality care in many areas, all their staff have degrees, and they share the responsibilities of program implementation equally. The correlation between team teaching and high scores in other areas might be worthy of further investigation.

Parent Involvement

The final training topic singled out both in the interviews and by the TOPP results was parent involvement. Five teachers and five directors indicated interest in further training in parent involvement.

Again, this is not an area that is unique to toddler caregivers. Again, this is an area in which all "trained" caregivers are receiving the same deficient training. A caregiver of children of any age must be prepared and able to communicate with and involve children's parents.

As one teacher pointed out, there is a difference between parent involvement, and parent communications. The first involves bringing parents into the classroom, the latter is knowing how and when to discuss issues relating to the child's care with the parents. Parent involvement is a phrase frequently used within the practicing early childhood community, and may likely be discussed in training programs. However, parent communication is not at all commonly discussed, and despite it's obvious importance, the concept of communications with parents does not nearly get the attention it deserves, in training, or in the field. There can be no parent involvement in a program without parent-teacher communications. This is the ability to relate to parents, to establish a personal relationship with them. An effective teacher training program will examine the needs of day-care parents, and discuss means of relating to parents; and establishing relationships with them. Parents are not peripheral in their children's lives or development, and should not be treated thus in child care.

While the TOPP did indicate a relatively respectable score of 76% in **involving parents**, the teachers and directors are definitely indicating they feel a need for more information. Whereas with team teaching it was the objective TOPP assessment that indicated a need for

new methods, in parent involvement the methods in use by the teachers meet the standards set by the TOPP. The teachers and directors are seeking more. Thus the imbalance of high TOPP scores juxtaposed with high perceived need.

This has a slightly different implication from a need for more training. The staff is not satisfied with what they are providing. Yet the TOPP results indicate that positive parent involvement practices are in place. Either the items on the TOPP do not identify what really are positive parent involvement practices, or the rating system is not critical enough to differentiate degrees of effective/non-effective practice. If the TOPP does not identify necessary practices for effective parent involvement strategies, then the essence of what is effective parent involvement in it's greatest sense needs to be explored.

Perhaps the one teacher who has been a day care parent actually has some answers that the others seek. She is the one teacher who is not interested in more parent involvement training, and hers is the one director who indicated the same. Interestingly, this one teacher has no child development background other than her nursing training. So her lack of child development training as it relates to day care had no bearing on her parent involvement practices. On the surface, this teacher's parent involvement practices seem fairly routine. Just like many others, she encourages parents to bring in materials that can potentially be used as art materials. Perhaps the difference lies in this teacher's somewhat regularly scheduled "tea parties", where parents come at the end of the work day to enjoy refreshments and talk

with other parents while their children play around them. Perhaps the difference is in her sharing information about the child's day with each parent on a daily basis, even rather forcefully (according to her) with parents who do not ask, or do not have the interest or energy to be attentive to the information. In light of the dissatisfaction by teachers with their own parent involvement practices, perhaps these ideas warrant further investigation as well.

OBSTACLES AND ENCOURAGEMENTS TO PURSUE FURTHER TRAINING

Center to center there was a wide variation in the support and encouragement offered for ongoing training. Center #5 does not encourage or support ongoing training in any way. This is not surprising as their requirement for employment is a high school diploma, and the quality and extent of their in-house training practices are questionable. Some centers encourage, or claim to encourage, ongoing training by making staff aware of local workshops, but they do not support staff in attending by providing any financial compensation, either for the hours or for costs, nor do they provide any incentives in the way of increased earnings for upgraded skills. Two of the centers did support and encourage ongoing training for their staff by encouraging attendance at local workshops, by compensating or attempting to compensate costs, and by simply allowing work hours to be spent in training workshops. In both these cases the teachers indicated they felt greatly supported in their work by their directors.

In centers that had regularly-scheduled staff or lead teacher meetings, the teachers did not consider this to be ongoing training,

regardless of who set the agenda. When the center closed for even half a day per year for a workshop for the teachers, teachers did consider this to be "ongoing training". The one teacher who is working in the center while completing her degree requirements considers her director to be supportive of ongoing training, because she is allowing this arrangement.

When these teachers were given the choice of schedule formats for a training workshop, the most popular choice was for one evening meetings. There was also a choice of one evening per week, or one evening per month, to allow a more thorough discussion of the subject. Teachers were less interested in extended workshops. Those who did consider this as a possibility indicated that a weekly gathering was preferable to a monthly one, as once per month was just too long to provide any continuity. These scheduling preferences should be considered in any attempt to make further training accessible to those who are currently working full time with toddlers.

CHILDCARE -A CAREER OR A STEPPING STONE?

There was a recurring theme among teachers that childcare is not the ultimate career, but a stepping stone to something else. Teachers who otherwise indicated that they were happy with their positions and their administrators, and seemed dedicated to their work, were already anticipating just how long they would remain in the field. This was revealed in such phrases as "until I decide what I really want to do", and "until I pay off my loans", and simply "about another year and a half". Of the twelve people interviewed, six had been at their current positions less than one year. These findings fit with other research

showing high turnover among caregivers, and especially among toddler caregivers.

After investing energies and resources in two and four year degrees, child caregivers are anticipating moving on to something else practically as they enter the market. One very elementary yet encompassing explanation for this phenomenon is the economical. Of the six teachers interviewed, one is salaried, and the rest are paid hourly. The one salaried teacher earns $14,000. The highest hourly wage reported is $7.90/hour. Even the most objective observer must question the economic value of investing in a four year degree, or even a two year degree, when wages/salaries upon graduation will be so low.

The director at center #3 worries about modeling multi-cultural acceptance within a center when increasingly it is only white women who are in the field, which in turn only furthers the stereotype. She said she has "not interviewed a man or a black for two years." They simply do not apply. This director attributes this to the low wages offered in early childhood. "ECE is not the ticket out of economic hardship." There are two men on staff at this center, who have both been employed there for over three years. An informal survey of the centers visited does confirm this director's concerns. Visible minorities are "invisible" in childcare. They are not there. The only men seen were the two in center #3, and of all other staff (not just toddler staff) in all centers, perhaps three were visible minorities.

The teachers in this sample are representative of the field in respect to the dilemma of what to call the people who <u>care for,</u> and <u>teach</u> young children all day. The phrase "early childhood educator" is

cumbersome. Some call themselves teachers, some, caregivers. The former omits the personal care and nurturing that makes up childcare. The latter phrase implies an absence of teaching. Perhaps only teachers are regarded by society as professionals, and caregivers are not. Perhaps it is an attempt by those within early childhood even if they do not believe the phrase best describes what they do, to be known as teachers, and thus be regarded as teachers.

There are professionals within the field of early childhood education. They are earning two and four year degrees in community colleges and universities. As the field of early childhood education matures it should also become more defined. One means of definition and maturation for the field is the continual refining of the training needs of the field practitioners.

This examination of the training needs of caregivers of toddlers has exposed areas in which the caregivers of toddlers would greatly benefit from additional training. In a greater sense, it is not incorrect to state that early childhood education is deficient in toddler training. Inquiries into the practical experiences and theoretical training provided by colleges and universities revealed a consensus that training in toddler development is lacking. When an early childhood training program claims to offer practical experience with all ages but provides experience with children over two and a half years of age, this is insufficient. People entering the field with "training" are more and more likely to be working with the fastest growing population within early childhood education,-children under age three. Students need more training in toddler developmental issues,

including social emotional development, cognitive development, and motor development. As well, they need to have practical experience with this age group in order to be marketable, and in order to survive professionally once they have landed the job.

This project also revealed other areas in which all students graduating from early childhood training programs are being insufficiently trained, regardless of the age groupings they find themselves working with. These areas are in team teaching and parent involvement. Teachers are generally dissatisfied with the hierarchical model of team teaching that is most prevalent. Models that lean toward more equal division of responsibility among the adults present allow greater satisfaction in terms of cohesion among team members. This is a relatively new approach and deserves consideration within the context of early childhood education training.

Teachers also voiced discontent with their own parent involvement practices. There was discussion of the differences between parent involvement and parent communications; the former meaning bringing the parent into the classroom, and the latter referring to establishing a communicative relationship with parents. While the presence of parent communications may be somehow implied in parent involvement, indications of the teachers interviewed do not support this assumption.

The results of this study demonstrate that the concepts of communication with parent as it is separate from parent involvement, team teaching, and more comprehensive training in the development of children under age three, deserve further consideration by institutions that strive to provide their students with the skills they need to be successful early childhood educators.

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APPENDIX A:

TEACHER INTERVIEW

QUESTIONS FOR TEACHERS

1. Please describe your position -both your title, and in your own words, what you do. Do you think your title best describes your position or would you call it something else? What?

2.What is the age group you work with?

2a. How many children and adults are in and working with this age group?

3. How long have you been working with children?

3a.In what capacities, how long each?

4. Have you ever had any formal or informal training for working with children? What types?

5. How long have you been working with toddler age children in group care situations?

6. Have you had any formal or informal training for working with toddlers? What types?

7. What experiences have been most influential in how you run your program?
(mentor? who has been influential? training or experience?
ie. like other rooms in the center, like another center worked at,
learned it in training, experimented until I liked it.....)

7a.set up the room?

7b.daily schedule?

7c.activities?

7d.other?

8. Have you ever considered getting additional training since you've been working?

8a. Did you follow through ? If not, why not? What are the obstacles?

9. Assuming that the topics to be covered were of great interest to you, how would the following training formats suit you, and fit into your schedule?

Please comment on the following.

__During naptime, on site_____

__A one evening workshop_____

__Two or more evenings on one week_____

__One evening per week for a series of weeks_____

__One evening per month, on a weekday_____

__An all day, one day workshop,(week day)_____

__An all day, one day workshop, (week-end day)_____

__A series of one day workshops,weekly_____

__A series of one day workshops, monthly_____

__Other_____

9a.Have you ever participated in workshops or training in any of these formats? Which one(s), and did the schedule work for you?

10. In your opinion, does this center encourage ongoing training?

How?

__Center provides periodic training_____
_____

How often? What topics?_____
_____

__Center encourages other training_____

Anything particular emphasized?_____

__Provides time release- how much? _____

upon request? automatically?_____

__Center will cover/contribute to cost of training? _____

upon request? automatically?_____

__Other_____

__Other comments?_____

10a. Would these conditions change at all if the request was for additional training related to working with other age groups, specialties, or administration?

11. Looking back, do you think the formal training you received prepared you adequately for working with toddlers?

11a. For working with children?

12. In what ways would you change the training you received to make it better?

13. If you could take additional training now, what topic areas would interest you?

__early childhood developmental milestones_____

__providing for language development_____

__fostering social emotional development_____

__planning for cognitive development_____

__enhancing motor development_____

__developmental theories_____

__play and young children_____

__discipline and limit setting_____

__special needs_____

__adult child interactions_____

__daily schedule_____

__constructive room arrangement_____

__screening and record keeping_____

__good nutrition_____

__health and safety_____

__team teaching_____

__involving parents _____

__other_____

14. Do you use any child assessment tools?
-record keeping practices? ie, daily chart, journal, daily or occasional???

-regular conferences with parents?

14a. Where did these ideas come from?

15. Have you ever heard of "Primary caregivers"?

15a. What do you think the phrase refers to?

15b. Have you ever tried using a primary caregiver system?

15c. Why would or wouldn't you recommend this system to other caregivers?

16. Does the center have a philosophy? printed? word of mouth? What is it?
(re care of children
re education of children
re parent involvement)

17. Do you have a personal philosophy concerning care and education of young children? What is it?

17a. Parent involvement? What is it?

18. Is there anything else you would like to add regarding training issues for caregivers of toddlers, either personal or general?

19. Would you mind telling me what is your rate of pay, and how long you have worked here?

QUESTIONS FOR TEACHERS

20. Please describe your position -both your title, and in your own words, what you do. Do you think your title best describes your position or would you call it something else? What?

21. What is the age group you work with?

21a. How many children and adults are in and working with this age group?

TRAINING ISSUES

22. How long have you been working with children?

22a. In what capacities, how long each?

23. Have you ever had any formal or informal training for working with children? What types?

24. How long have you been working with toddler age children in group care situations?

25. Have you had any formal or informal training for working with toddlers? What types?

26. What experiences have been most influential in how you run your program? (mentor? who has been influential? training or experience?
ie. like other rooms in the center, like another center worked at, learned it in training, experimented until I liked it.....)

26a. set up the room?

26b. daily schedule?

26c. activities?

26d. other?

27. Have you ever considered getting additional training since you've been working?

27a. Did you follow through ? If not, why not? What are the obstacles?

28. Assuming that the topics to be covered were of great interest to you, how would the following training formats suit you, and fit into your schedule?

Please comment on the following.

__During naptime, on site_____

__A one evening workshop_____

__Two or more evenings on one week_____

__One evening per week for a series of weeks_____

__One evening per month, on a weekday_____

__An all day, one day workshop,(week day)_____

__An all day, one day workshop, (week-end day)_____

__A series of one day workshops,weekly_____

__A series of one day workshops, monthly_____

__Other_____

28a.Have you ever participated in workshops or training in any of these formats? Which one(s), and did the schedule work for you?

29. In your opinion, does this center encourage ongoing training?

How?

__Center provides periodic training_____

_____

How often? What topics?_____

_____

__Center encourages other training_____

Anything particular emphasized?_____

__Provides time release- how much? _____

upon request? automatically?_____

__Center will cover/contribute to cost of training? _____

upon request? automatically?_____

__Other_____

__Other comments?_____

29a. Would these conditions change at all if the request was for additional training related to working with other age groups, specialties, or administration?

30. Looking back, do you think the formal training you received prepared you adequately for working with toddlers?

For working with children?

31. In what ways would you change the training you received to make it better?

32. If you could take additional training now, what topic areas would interest you?

__early childhood developmental milestones_____

__providing for language development_____

__fostering social emotional development_____

__planning for cognitive development_____

__enhancing motor development_____

__developmental theories_____

__play and young children_____

__discipline and limit setting_____

__special needs_____

__adult child interactions_____

__daily schedule_____

__constructive room arrangement_____

__screening and record keeping_____

__good nutrition_____

__health and safety_____

__team teaching_____

__involving parents _____

__other_____

33. Do you use any child assessment tools?
-record keeping practices? ie. daily chart, journal, daily or occasional???

-regular conferences with parents?

33a. Where did these ideas come from?

34. Have you ever heard of "Primary caregivers"?

34a. What do you think the phrase refers to?

34b. Have you ever tried using a primary caregiver system?

34c. Why would or wouldn't you recommend this system to other caregivers?

35. Does the center have a philosophy? printed? word of mouth? What is it?
(re care of children
re education of children
re parent involvement)

36. Do you have a personal philosophy concerning care and education of young children?

Parent involvement? What is it?

37. Is there anything else you would like to add regarding training issues for caregivers of toddlers, either personal or general?

38. Would you mind telling me what is your rate of pay, and how long you have worked here?

APPENDIX B:

DIRECTOR INTERVIEW

4/23/90

Questions to Directors

1. This center is best described as

__FOR PROFIT

__branch of chain of day care
__independently owned
__work place day care
__Other, what?

__NOT FOR PROFIT

__Public school affiliated
__church affiliated
__community center
__parent education center
__Other, what?

2. Are there any particular criteria for children to be eligible for this program?
   __ low income
   __ teenage parents
   __ special needs
   __ students
   __ employees of particular workplace
   __ other, what.

3.Check what type of care best describes program

__full time only
__primarily full time, part time available
__part time only
__primarily part time, full time available

4. Describe age groupings within the center. ie 3 mos-12 mos, 12 mos-24 mos, etc. How many children and staff in each category?

5. Does the center have a philosophy?
What is it? Is it printed? word of mouth?
Does it address: care of children,
education,
parent involvement?

6. Different centers have different requirements for their staff.
What training or educational background must a person have to be considered eligible to be a teacher or assistant at this center?

6a. Must a person have experience working with children before they will be hired? (What? and how long?)

6b. Must they have had working or training experience with the age group they will be working with? (what? how long?)

6c. When you are hiring new preschool staff, how easy is it for you to find people with the training and experience you seek?

6d. When you are hiring toddler staff, how easy is it for you to find people with the training and experience you seek?
(ie. are there enough toddler trained people out there)

6e. Do you seek the same training and experience in staff for toddler and preschool caregivers?

7. Since you have been a director, has any staff person approached you to discuss further work related training?

7a. What were the circumstances? How did it work out?

7b. Have you ever approached a staff person to recommend additional further training?

7c. What were the circumstances? How did it work out?

8a. What is this center's policy regarding inservice training?

__Center provides periodic training_____
How often? What topics?_____

__Center encourages other training_____
Anything particular emphasized?_____

_Would additional training be rewarded in increased earnings?_____

__If training is after regular work hours, will the center provide time off to compensate for time in training?_____

__Would this be paid time?_____
upon request? automatically?_____

__Center will cover/contribute to cost of training? _____
upon request? automatically?_____

If one of your toddler staff wanted to pursue additional training related to working with toddlers **after hours**:

(a) Would this additional training be rewarded in increased earnings?

(b) Would they be reimbursed for the cost of the training?

(c) Could they receive time off to compensate for the hours in training?

(d) Would this be paid time off?

(e) Would these conditions change at all if the request was for additional training related to working with other age groups, specialties, or administration?

__Other comments?

9. If one of your toddler staff wanted to pursue additional training related to working with toddlers **during regular working hours** --ie a one day workshop:

9a. Under what circumstances would this be possible?

9b. Would they be reimbursed for the cost of the training?

9c. How would that person's classroom responsibilities be covered? (would the teacher have to pay the sub?).

9d. Would that staff person be paid or not paid for those hours?

9e. Would these conditions change at all if the training in question was more than one day, for example, two or more days in a row, or once a week?

9f. Would these conditions change at all if the request was for additional training related to working with other age groups, specialities, or administration?

9g. Other Comments?

10. In what areas could your toddler staff best benefit from further training?

11. Please indicate which if any of these you think your toddler staff could benefit from additional training in: any additional comments are welcome.

__early childhood developmental milestones_____

__providing for language development_____

__fostering social emotional development_____

__planning for cognitive development_____

__enhancing motor development_____

__developmental theories_____

__play and young children_____

__discipline and limit setting_____

__special needs_____

__adult child interactions_____

__daily schedule_____

__constructive room arrangement_____

__screening and record keeping_____

__good nutrition_____

__health and safety_____

__team teaching_____

__involving parents _____

__other_____

12. What kinds of records do you keep on the children? ie. attendance, other?

12a.Daily chart or journal? Daily or occasional. other?

13. Does this center use any child assessment tools?

14. Does the center use any program evaluation tools?

15. Could you give a brief sketch of your own training and work experiences?

16. Is there anything else you would like to add regarding training issues for caregivers of toddlers?

draft March 30, 1990 **APPENDIX C:**

TODDLER PROGRAM PROFILE (TOPP)

Developed from the High/Scope Program Implementation Profile (PIP) and the Early Childhood Environment Rating Scale (ECERS) to assist caregivers of toddlers in group care to assess their own program.

I. PHYSICAL ENVIRONMENT

* 1. The room is divided into well-defined and logically located areas.

(1)	(2)	(3)	(4)	(5)
The room is open and no areas are defined.		Minor division of space (e.g., 2 or 3 areas) with boundaries defined by large furniture or room dividers.		Clear division of space with areas marked by low furniture, low shelves, tape, labels.

Notes:

* 2. There is adequate space in each defined area of the room.

(1)	(2)	(3)	(4)	(5)
Cramped space greatly limits movement and the number of children who can work in each area. Few small areas for privacy or independent exploration.		Inadequate space in some areas limits the number of children who can work in the same place. Insufficient small inviting areas. Areas are large and open requiring many children to be together.		Adequate space allows for groups of children to work together in all areas. Balance of large and small areas allow independent or paired exploration.

Notes:

* 3. The room is safe and well-maintained.

(1)	(2)	(3)	(4)	(5)
There are obvious safety hazards (e.g., sharp edges, improperly closing cupboards) Furnishings too large for toddlers. Toys and parts are small enough to present safety threat i.e. choking, eye injury.		No obvious safety hazards but materials are in poor condition (e.g., flaking, ripped, parts missing). Some furnishings of appropriate size.		Toys and materials are safe and maintained in good condition; potentially dangerous areas and materials are adequately supervised. Furnishings are of appropriate size. Sizes of toys and parts do not present safety threat.

4.*^* Diapering/Toiletting area is well located and adequately equipped.

(1)	(2)	(3)	(4)	(5)
Lack of provisions/ equipment interferes with care of children. (ex. area located poorly, no hot water in area, no potty chairs or low sinks.		Equipment difficult to keep clean or inaccessible. Sanitary standards erratic. Potty chairs may be on premises but not easily accessible.		Provisions and equipment easily accessible, well organized, easy to keep clean. Potty chairs and low sinks easily available.

Notes:

* 5. There are enough materials accessible to children in each area for several children to use simultaneously.

(1)	(2)	(3)	(4)	(5)
Limited materials available in each area. Materials must be brought out by adults or are not available, or are not age appropriate.		Some materials are accessible to children. Adequate materials in some but not all areas. Some available materials are not age appropriate.		All materials are accessible during designated times in the daily schedule. Adequate and age appropriate materials available in each area.

Notes:

* 6. Materials for using the senses, for manipulation, and real things are available throughout the room.

(1)	(2)	(3)	(4)	(5)
Little variety of materials for exploration. Lack of opportunity to use multiple senses in each area; few real objects.		Some variety of materials and opportunity to use multiple senses in each area; some real objects.		Wide variety of materials for manipulation. Materials appeal to all the senses. Many real objects and unstructured materials.

Notes:

***^*7. Physical environment accomodates child's need for comfort, relaxation and provides "softness".**

(1)	(2)	(3)	(4)	(5)
Little or no upholstered furniture, cushions, rugs, or rocking chair available for children to use.		"Cozy" area provided with some cushions and softness, or some upholstered furniture available around the room.		Planned "cozy" area with rug, cushions child sized rocker, adult rocker, or upholstered furniture. This "softness" apparent in other areas as well.

Notes:

8. Materials/equipment on which children can exercise large muscles are available at all times.

(1)	(2)	(3)	(4)	(5)
No or limited evidence of equipment to encourage large-muscle play (lifting, climbing, pushing/pulling). Little variety in equipment.		Moderate amount of equipment to encourage large-muscle development, or equipment is available only at designated parts of the day, or only on certain days.		Many pieces of equipment to encourage large-muscle development are readily available and accessible. Equipment is in good condition and is age and size appropriate.

Notes:

*** 9. A variety of materials promote an awareness of differences among people and their experiences.**

(1)	(2)	(3)	(4)	(5)
No or few materials reflect differences in cultures, environments, livelihoods, physical abilities.		Some materials reflect differences.		Many materials reflect differences (books, food, cooking utensils, clothing, photos of children's families and homes, prop boxes, tools from different types of jobs, music).

Notes:

II. DAILY SCHEDULE

*** 10. Adults implement a consistent daily schedule.**

(1)	(2)	(3)	(4)	(5)
No consistent routine is followed; adults do not refer to time blocks and sequences of activities; adults tell children what to do next.		A routine is followed some of the time (parts of the day; some but not all days of the week); adults sometimes refer to time blocks and sequences of activities.		A consistent routine is followed all the time; adults refer to the daily schedule, naming time blocks and sequences; children are asked to verbalize or indicate what will happen next; adults help children make the transition from one time period to the next.

Notes:

*** 11. The daily schedule provides a balance of large and small group activities.**

(1)	(2)	(3)	(4)	(5)
There is no variety in the size or type of group activities.		There is some variety in the size and type of group activities.		There is variety in the size and type of group activities throughout the day (e.g., schedule provides for large groups, small groups and individual groupings.

Notes:

12. During adult-initiated times of the day (e.g., small-group time, circle time) children have opportunities to initiate and carry out their own ideas.

(1)	(2)	(3)	(4)	(5)
Children are expected to listen without opportunities for manipulating materials.		Children are all directed to use materials in the same way; children are expected to produce the same products.		Children are free to use materials in their own way. Adults acknowledge individual efforts.

Notes:

III. ADULT-CHILD INTERACTION

^ 13. Adults use language to communicate with children in informal conversation, and encourage and extend children's talk.

(1)	(2)	(3)	(4)	(5)
Little or no talking to children. Language is used primarily to control children's behavior. (Ex. No, NO!)		Adults sometimes label or describe what they or the children are doing. Adults ask mostly "one word answer" questions. Children's talk is not encouraged.		Adults repeat what toddlers say, and expand or elaborate when appropriate. Staff child conversations are frequent. Children's talk is encouraged.

Notes:

* 14. Adults maintain a balance between child and adult talk, speak in a natural voice, and listen carefully to children.

(1)	(2)	(3)	(4)	(5)
Talk is mainly from adults to/at children; Adult talk is directive; Adults use exaggerated diction or unnatural intonation when talking to children.		Children do some talking, either spontaneously or in response to adults; adult talk still dominates; adults nod or say yes to children without carefully listening to what they are saying.		Adults engage in give-and-take conversation with children; adults listen/respond to children; adults speak to children who do not yet talk; adults speak to children at child's eye-level. Adults confirm what child has expressed.

Notes:

15. Adults encourage children to have fun with spoken language.

(1)	(2)	(3)	(4)	(5)
Rhymes or songs are taught but none are invented by the adults or children.		Children or adults sometimes make up rhymes or songs, but these are not taken up by adults, or elaborated on by the group. Adults read to children occasionally.		Children's words or actions are spontaneously turned into songs, rhymes, or chants and recited and extended by others; adults read to children daily.

Notes:

* 16. **Adults participate actively in children's play.**

(1)	(2)	(3)	(4)	(5)
Adults observe but do not join in children's play, or adults dominate play; adults keep busy with maintenance chores While children play.		Adults sometimes talk about and join in children's play; adults are "recipients" of children's actions but not reciprocal participants.		Adults regularly play and converse with children; adults are active and reciprocal participants.

Notes:

* 17. **Children are encouraged to solve problems and act independently.**

(1)	(2)	(3)	(4)	(5)
Adults do things for children (cleaning up, getting dressed); adults tell children how to do things.		Adults sometimes let children solve problems or take care of their own needs but may intervene prematurely.		Adults encourage children to do/get things on their own even if it takes longer or is not done "perfectly."

Notes:

*** 18. **Adults have appropriate expectations for social interaction and cooperation among children.**

(1)	(2)	(3)	(4)	(5)
Adults have inappropriate expectations for children's interactions. Children are expected to cooperate and interact in small groups.		Adults interact with children individually and in small groups; materials are sufficient for a few children to use similar materials simultaneously.		Adults encourage appropriate child interactions, i.e. refering to other children in conversation, and prompting small interactions ie. requesting one child to beckon another. Adults have appropriate expectations for social interactions of children.

Notes:

19. **Adults maintain reasonable limits while redirecting inappropriate behavior into problem-solving situations.**

(1)	(2)	(3)	(4)	(5)
Adults do not make rules/limits clear beforehand; rules are inconsistent or are harshly enforced by physical punishment or restraint. Children are disciplined erratically. Expectations are not developmentally appropriate.		Expectations are consistent. Adults sometimes step in before problems arise. Discipline is consistent. No explanations are given. Discipline is consistent. No explanations are given.		Expectations and discipline are developmentally appropriate and consistent; Adults offer alternative solutions to problem behaviors; adults explain why limits are being imposed in language the child can understand.

Notes:

20. **Adults maintain an awareness of the whole classroom even when working with individual or small groups of children.**

(1)	(2)	(3)	(4)	(5)
Adults appear to be aware of only that area/those children with whom they are working; situations that will need adult intervention are not anticipated and caught before negative consequences occur.		Adults are aware of their own area plus what is happening right near them; children and areas without an adult present are often left on their own as long as they are calm.		Adults monitor what is happening in areas of the room other than the one they are working in: Situations that may end negatively are anticipated and acted upon before they occur. Adults also interact with groups or individuals who are not in immediate need of adult attention.

Notes:

*** 21. The program has allowed for provisions for exceptional children.

(1)	(2)	(3)	(4)	(5)
No provisions or plans for modifying the physical environment, program, or schedule for exceptional children. Reluctance to admit children with special needs.		Minor accomodations made to get through the day but no long range plans for meeting the special needs of exceptional children. No attempt to assess degree of need.		Staff assesses needs of all children and makes modifications in environment, program or schedule to meet special needs. Planning for exceptional children involves parents and professionally trained consultants.

IV. ADULT-ADULT INTERACTION

* 22. Staff (when there is more than one adult staff member) use a team teaching model, with adults sharing responsibilities for curriculum implementation.

(1)	(2)	(3)	(4)	(5)
Head teachers plan and conduct all activities; assistants and aides play minor roles in the program.		Assistants and aides sometimes work with children but do not participate in all components of planning and implementing the daily routine.		All adults participate equally in doing activities and interacting with children throughout the daily routine.

Notes: (Circle N.A. here if only one staff member)

23. Staff (when there is more than one adult staff member) use a team planning and evaluation process.

(1)	(2)	(3)	(4)	(5)
Staff do not have regularly scheduled planning and evaluation sessions; program practices and children's needs are discussed only informally.		Staff sometimes meet for planning and evaluation based on the daily routine and child observations; planning forms are not used consistently.		Staff establish regular meeting times to plan and evaluate the daily routine, observations about children are shared during planning and evaluation; a cooperatively developed planning form is used consistently.

Notes: (Circle N.A. here if only one staff member)

24. **Staff regularly make entries on either a child assessment tool or a daily chart.**

(1)	(2)	(3)	(4)	(5)
Staff do not use any tool or chart to record information about children.		Staff occasionally make entries, but the practice is not consistent.		Staff have a regular time and procedure for making chart or assesment tool entries.

Notes:

25. **Staff complete the daily chart or assessment record at regular intervals to document children's growth and identify individual strengths and needs.**

(1)	(2)	(3)	(4)	(5)
Staff do not use any chart or tool and do not "formally" identify strengths and needs.		Staff write information occasionally but do not consistently follow up on children. Results are not tabulated or analyzed.		Staff assess children's strengths and needs at least twice a year to follow up on children; results are used to develop the program and are shared with others (parents and administrators).

Notes:

26. **Staff communicate regularly with parents .**

(1)	(2)	(3)	(4)	(5)
Staff rarely talk to parents about what their children are doing;		Staff sometimes talk to parents about their children; no regular conferences are scheduled.		Staff often talk to parents about their children's activities; regular conferences are scheduled.

Notes;

27. **Staff involve parents in the program.**

Parents are not encouraged to visit or become involved in program activities.	Parents are involved in minimal or routine tasks but are not encouraged to interact with the children throughout the day.	Parents are encouraged to visit, to learn about the program, and to participate actively; Parents are greeted regularly.

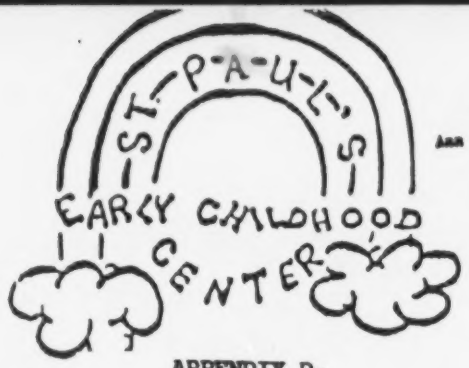
Notes:

*** 28. Staff are involved in ongoing inservice training.**

(1)	(2)	(3)	(4)	(5)
Inservice workshops are not regularly held; staff have little input into workshops when they are held.		Inservice workshops are held several times throughout the year; staff suggest topics but have little other role in planning/conducting the workshops; there is little follow-up after workshops.		Inservice workshops are held regularly; staff needs and interests are solicited in planning the workshops; staff actively participate in the workshops; there is regular follow-up to make sure the material covered is being implemented; staff have access to resources to assist them with program implementation.

Notes:

Elise Locke
Karen O'Rourke



225 Third Street
Ann Arbor, Michigan 48103
313-747-6360

APPENDIX D:

LETTER FROM CENTER DIRECTOR

June 4, 1990

Dear Brenlee,

It has taken me altogether too long to look over your excellent Toddler Program Profile. I think it is very well thought out and it has given me some areas to think about that need some changing here and there at our Center.

If you are going to print this for teachers and directors to use, I think it would be appropriate to put some form of directions at the beginning, so they know what they are doing right from #1 on. Maybe I'm a little slow, but it took me till the second page to figure out just what I was supposed to do with it.

ToPP can also serve as a springboard for in-service topics and improvement all around. I really like it.

Sincerely,

Elise Locke

Elise Locke